

Fill in this information to identify the case:

United States Bankruptcy Court for the:

____ District of DELAWARE
(State)Case number (if known): _____ Chapter 11☐ Check if this is an amended filing**Official Form 201****Voluntary Petition for Non-Individuals Filing for Bankruptcy**

04/25

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name Immersive Art Space LP

2. All other names debtor used in the last 8 years _____

Include any assumed names, trade names, and *doing business* as names _____3. Debtor's federal Employer Identification Number (EIN) 8 5 - 4 0 0 7 5 7 84. Debtor's address **Principal place of business** **Mailing address, if different from principal place of business**108 West Germania Place

Number Street

Number Street

P.O. Box _____

Chicago

City

IL

State

60610

ZIP Code

City

State

ZIP Code

Location of principal assets, if different from principal place of businessCook

County

Number Street

City

State

ZIP Code

5. Debtor's website (URL) _____

Debtor	Immersive Art Space LP	Case number (if known) _____
6. Type of debtor	<input type="checkbox"/> Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP)) <input checked="" type="checkbox"/> Partnership (excluding LLP) <input type="checkbox"/> Other. Specify: _____	
7. Describe debtor's business	<p>A. Check one:</p> <input type="checkbox"/> Health Care Business (as defined in 11 U.S.C. § 101(27A)) <input type="checkbox"/> Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) <input type="checkbox"/> Railroad (as defined in 11 U.S.C. § 101(44)) <input type="checkbox"/> Stockbroker (as defined in 11 U.S.C. § 101(53A)) <input type="checkbox"/> Commodity Broker (as defined in 11 U.S.C. § 101(6)) <input type="checkbox"/> Clearing Bank (as defined in 11 U.S.C. § 781(3)) <input checked="" type="checkbox"/> None of the above	
	<p>B. Check all that apply:</p> <input type="checkbox"/> Tax-exempt entity (as described in 26 U.S.C. § 501) <input type="checkbox"/> Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3) <input type="checkbox"/> Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))	
	<p>C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See http://www.uscourts.gov/four-digit-national-association-naics-codes .</p> <p style="text-align: center;">7 1 3 9</p>	
8. Under which chapter of the Bankruptcy Code is the debtor filing?	<p>Check one:</p> <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input checked="" type="checkbox"/> Chapter 11. Check all that apply:	
	<input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$3,424,000 (amount subject to adjustment on 4/01/28 and every 3 years after that). <input type="checkbox"/> The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). <input checked="" type="checkbox"/> The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and it chooses to proceed under Subchapter V of Chapter 11. <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b). <input type="checkbox"/> The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the <i>Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11</i> (Official Form 201A) with this form. <input type="checkbox"/> The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.	
9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. District _____ When _____ Case number _____ <div style="text-align: center; margin-left: 100px;">MM / DD / YYYY</div>	
If more than 2 cases, attach a separate list.	District _____ When _____ Case number _____ <div style="text-align: center; margin-left: 100px;">MM / DD / YYYY</div>	

Debtor Immersive Art Space Case number (if known) _____
Name

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?

List all cases. If more than 1, attach a separate list.

☐ No

☒ Yes. Debtor Lighthouse Immersive Inc. Relationship Affiliate
 District Delaware When 07/27/2023
MM / DD / YYYY
 Case number, if known 23-11021-LSS

11. Why is the case filed in this district?

Check all that apply:

☐ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.

☒ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?

☒ No

☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

Why does the property need immediate attention? (Check all that apply.)

☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard? _____

☐ It needs to be physically secured or protected from the weather.

☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

☐ Other _____

Where is the property?

Number _____ Street _____

City _____ State ZIP Code _____

Is the property insured?

☐ No

☐ Yes. Insurance agency _____

Contact name _____

Phone _____

Statistical and administrative information

13. Debtor's estimation of available funds

Check one:

☒ Funds will be available for distribution to unsecured creditors.

☐ After any administrative expenses are paid, no funds will be available for distribution to unsecured creditors.

14. Estimated number of creditors

☒ 1-49

☐ 50-99

☐ 100-199

☐ 200-999

☐ 1,000-5,000

☐ 5,001-10,000

☐ 10,001-25,000

☐ 25,001-50,000

☐ 50,001-100,000

☐ More than 100,000

Name _____

Case number (if known)

15. Estimated assets	<input type="checkbox"/> \$0-\$50,000	<input checked="" type="checkbox"/> \$1,000,001-\$10 million	<input type="checkbox"/> \$500,000,001-\$1 billion
	<input type="checkbox"/> \$50,001-\$100,000	<input type="checkbox"/> \$10,000,001-\$50 million	<input type="checkbox"/> \$1,000,000,001-\$10 billion
	<input type="checkbox"/> \$100,001-\$500,000	<input type="checkbox"/> \$50,000,001-\$100 million	<input type="checkbox"/> \$10,000,000,001-\$50 billion
	<input type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> More than \$50 billion

16. Estimated liabilities

<input type="checkbox"/> \$0-\$50,000	<input checked="" type="checkbox"/> \$1,000,001-\$10 million	<input type="checkbox"/> \$500,000,001-\$1 billion
<input type="checkbox"/> \$50,001-\$100,000	<input type="checkbox"/> \$10,000,001-\$50 million	<input type="checkbox"/> \$1,000,000,001-\$10 billion
<input type="checkbox"/> \$100,001-\$500,000	<input type="checkbox"/> \$50,000,001-\$100 million	<input type="checkbox"/> \$10,000,000,001-\$50 billion
<input type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> More than \$50 billion

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

17. Declaration and signature of authorized representative of debtor

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 05/30/2025
MM / DD / YYYY

x /s/ Michael Willetts

Signature of authorized representative of debtor

Title Authorized Agent

Michael Willetts

Printed name

18. Signature of attorney

x /s/ Karen M. Grivner

Signature of attorney for debtor

Date **05/30/2025**

MM / DD / YYYY

Karen M. Grivner

Printed name

Clark Hill PLC

Firm name

824 N. Market Street, Suite 710

Number	Street
1	1st Street
2	2nd Street
3	3rd Street
4	4th Street
5	5th Street
6	6th Street
7	7th Street
8	8th Street
9	9th Street
10	10th Street
11	11th Street
12	12th Street
13	13th Street
14	14th Street
15	15th Street
16	16th Street
17	17th Street
18	18th Street
19	19th Street
20	20th Street
21	21st Street
22	22nd Street
23	23rd Street
24	24th Street
25	25th Street
26	26th Street
27	27th Street
28	28th Street
29	29th Street
30	30th Street
31	31st Street
32	32nd Street
33	33rd Street
34	34th Street
35	35th Street
36	36th Street
37	37th Street
38	38th Street
39	39th Street
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42	42nd Street
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83	83rd Street
84	84th Street
85	85th Street
86	86th Street
87	87th Street
88	88th Street
89	89th Street
90	90th Street
91	91st Street
92	92nd Street
93	93rd Street
94	94th Street
95	95th Street
96	96th Street
97	97th Street
98	98th Street
99	99th Street
100	100th Street

Wilmington

City

302-250-4750

Contact phone

DE 19801

State ZIP Code

kgrivner@clarkhill.com

Email address

4372

Bar number

DE

State

Immersive Art Space

Affiliated Pending Bankruptcy Cases

Debtor: Lighthouse Immersive USA, Inc.
Relationship: General Partner
District: Delaware
When: 07/27/2023
Case #: 23-11022-LSS

CORPORATE RESOLUTION AUTHORIZING FILING OF BANKRUPTCY PETITION
OF
IMMERSIVE ART SPACE LP
(the “Company”)

The undersigned, constituting each Partner (as defined in that certain Agreement of Limited Partnership, dated November 13, 2020 and below (“**Agreement**”)) of the Company, do hereby consent to the adoption of the following resolutions as of the date hereof:

WHEREAS, the Company is a Delaware limited partnership by and among 031165 USA, Inc.¹, a Delaware corporation (“**USA Limited Partner**”), Maestro Immersive Art Inc., a New York corporation (“**Maestro Limited Partner**” and together with USA Limited Partner, the “**Limited Partners**”), and Immersive Art Space LLC, a Delaware limited liability company and general partner of the limited partnership (“**General Partner**” and together with the Maestro Limited Partner and USA Limited Partner, collectively, the “**Partners**” and each, individually, a “**Partner**”), pursuant to that certain Agreement;

WHEREAS, the Company experienced rapid growth during the Covid-19 pandemic, which proved unsustainable due to business challenges, including the absence of a substantial financial department or a long-term chief financial officer;

WHEREAS, the Company’s financial strain deepened as government restrictions in place during the Covid-19 pandemic were lifted, allowing theatres, galleries, and museums to resume operations, and resulting in multiple competitors entering the market with competitive prices;

WHEREAS, the Company began winding down its operations by late 2022 and early 2023 due to the aforementioned challenges, with its debt far exceeding the value of its assets and causing an inability to pay its debts as they became due;

WHEREAS, the Partners have had the opportunity to consult with the Company’s management, legal and financial advisors to fully consider, and have considered, the strategic alternatives available to the Company;

WHEREAS, to reconcile and adjudicate the claims against it with limited assets remaining, the Partners of the Company deem it desirable and in the best interest of the Company,

¹ Successor in interest to Lighthouse Immersive USA, Inc., successor in interest to Lighthouse Immersive USA, Corp.

its creditors and other relevant stakeholders, for the Company to file a voluntary petition for relief under the provisions of chapter 11 subchapter V of title 11 of the United States Code (the “**Chapter 11 Subchapter V Case**”) before the United States Bankruptcy Court for the District of Delaware (the “**Bankruptcy Court**”);

WHEREAS, each Limited Partner has consented in writing to the filing of the Chapter 11 Subchapter V Case, constituting a Major Matter pursuant to Section 6.01(c) of the Agreement;

NOW THEREFORE BE IT RESOLVED, that Michael Willetts (the “**Authorized Person**”) is hereby authorized, empowered and directed, with full power of delegation, to negotiate, execute, deliver and file with the Bankruptcy Court, in the name and on behalf of the Company, plans, petitions, schedules, statements, motions, lists, applications, pleadings, papers, affidavits, declarations, orders and other documents as deemed necessary, appropriate, or advisable, for the bankruptcy filing (collectively, the “**Chapter 11 Subchapter V Filings**”) with such changes therein and additions thereto as the Authorized Person may deem necessary, appropriate or advisable, for the execution and delivery of any of the Chapter 11 Subchapter V Filings by the Authorized Person with any changes thereto to be conclusive evidence that the Authorized Person deemed such changes to meet such standard;

RESOLVED, that the Authorized Person shall be, and hereby is, authorized, empowered and directed, with full power of delegation, in the name and on behalf of the Company, to take and perform any and all further acts and deeds that the Authorized Person deems necessary, appropriate, or desirable in connection with the Company’s Chapter 11 Subchapter V Case or Chapter 11 Subchapter V Filings, including, without limitation, (i) the engagement of professionals, including but not limited to, Husch Blackwell LLP and Clark Hill PLC, (ii) the payment of fees, expenses and taxes as the Authorized Person deems necessary, appropriate, or desirable, subject to the requisite Bankruptcy Court approval, and (iii) negotiating, executing, delivering, performing and filing any and all additional documents, schedules, statements, lists, papers, agreements, certificates and/or instruments (or any amendments or modifications thereto) in connection with, or in furtherance of, the Chapter 11 Subchapter V Case with a view to the successful confirmation of the Chapter 11 Subchapter V Case (such acts to be conclusive evidence that the Authorized Person deemed the same to meet such standard); and

RESOLVED, that any and all past actions heretofore taken by the Authorized Person in the name of and on behalf of the Company in furtherance of any or all of the preceding resolutions be, and the same hereby are, ratified, confirmed, and approved in all respects as the acts and deeds of the Company.

[SIGNATURES ON FOLLOWING PAGE]

The undersigned, being all the Partners of the Company, consent to the foregoing resolutions.

Date as of May 30, 2025.

GP: IMMERSIVE ART SPACE LLC,
a Delaware limited liability company
By a majority of its Managers

Signed by:
By: Maria Shclouer
6286BB09DC804D2...
Name: Maria Shclouer

Title: Manager
DocuSigned by:
By: Irina Shabshis
A76A701213B14E4...
Name: Irina Shabshis
Title: Manager

USA LIMITED PARTNER:
031165 USA, INC.,
A Delaware corporation

DocuSigned by:
By: [Signature]
D8BA8878F034424...
Name: Allan Nackan on behalf of
B. Riley Farber Inc. in its capacity as
CCAA Monitor of 031165 USA,
INC., successor in interest to
LIGHTHOUSE IMMERSIVE USA,
INC. and not in its personal capacity
Title: CCAA Monitor

MAESTRO LIMITED PARTNER:
MAESTRO IMMERSIVE ART INC.,

Signed by:
By: Maria Shclouer
6286BB09DC804D2...
Name: Maria Shclouer
Title: Partner

DocuSigned by:
By: Irina Shabshis
A76A701213B14E4...
Name: Irina Shabshis
Title: Partner

**United States Bankruptcy Court
District of Delaware**

In re **Immersive Art Space LP**

Debtor(s)

Case No.

Chapter

11

CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for **Immersive Art Space LP** in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

031165 USA, Inc.
1201 N. Orange Street, Suite 762
Wilmington, DE 19801

Maestro Immersive Art Inc.
4 Harness Court
North Salem, NY 10560

☐ None [*Check if applicable*]

May 30, 2025

Date

/s/ Karen M. Grivner

Karen M. Grivner

Signature of Attorney or Litigant
Counsel for **Immersive Art Space LP**
Clark Hill PLC

824 N. Market Street, Suite 710
Wilmington, DE 19801
302-250-4760 Fax:302-421-9439
kgrivner@clarkhill.com

**United States Bankruptcy Court
District of Delaware**

In re **Immersive Art Space LP**

Debtor(s)

Case No.

Chapter

11

LIST OF EQUITY SECURITY HOLDERS

Following is the list of the Debtor's equity security holders which is prepared in accordance with rule 1007(a)(3) for filing in this Chapter 11 Case

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
031165 USA, Inc. 1201 N. Orange Street, Suite 762 Wilmington, DE 19801		69.90	limited partnership
Immersive Art Space LLC 108 West Germania Place Chicago, IL 60610		0.2	limited partnership
Maestro Immersive Art Inc. 4 Harness Court North Salem, NY 10560		29.90	limited partnership

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the **Authorized Agent** of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date **May 30, 2025**Signature **/s/ Michael Willetts**
Michael Willetts

Penalty for making a false statement of concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
18 U.S.C. §§ 152 and 3571.

Fill in this information to identify the case:Debtor name **Immersive Art Space LP**United States Bankruptcy Court for the: **DISTRICT OF DELAWARE**

Case number (if known): _____

☐ Check if this is an
amended filing**Official Form 204****Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders****12/15**

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
14039483 Canada Inc. 1480 Howe St 30036 Vancouver BC V6Z 1C4 Canada		Trade Debt				\$1,131.34
City of Chicago Department of Law c/o Jason L. Rubin 2 N. LaSalle Street, Suite 440 Chicago, IL 60602	Jason L. Rubin jason.rubin@cityofchicago.org 312-744-4174	Chicago Department of Finance Tax Enforcement Unit Tax Type: 7510, Code Chapter: 4-156 For the Period: July 1, 2016 - June 30, 2023	Disputed			\$0.00
Cloud Space Inc. 301-5399 Eglinton Avenue W Etobicoke, ON M9C 5K6 CANADA	sales@cloudspaceinc.com	Trade Debt				\$895.84
Department of Administrative Hearings 400 W. Superior Street Chicago, IL 60654	Aaron McKerry aaron.mckerry@cookcountyl.gov	Department of Revenue Citation	Disputed			\$0.00
Duane Morris LLP 305 17th Street Philadelphia, PA 19103	accountsreceivable@duanemorris.com 215-979-1000	Legal fees				\$675.50

Debtor **Immersive Art Space LP**
Name

Case number (if known)

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Fern Hill Company c/o Nick Anderson 500 West Madison Avenue Suite 1000 A35 Chicago, IL 60605	Nick Anderson nickanderson@fernhillcompany.com	Trade Debt				\$16,000.00
Fireflyhigh, Inc. 1452 S. Peoria St. Chicago, IL 60608	eric.prado@fireflyhigh.com	Trade Debt				\$1,456.01
Germania Plaza, LLC c/o R2 Core 108, LLC 108 W. Germania Place Chicago, IL 60610	Marc Garrison mgarrison@r2.me	Office rent				\$420,004.02
Law Offices of Lori A. Goldstein, LLC 1787 Orchard Lane #8355 Northfield, IL 60093	lori.a.goldstein@gmail.com	Legal fees				\$540.00
Nixon Peabody LLP c/o Erica Van Loon 300 South Grand Avenue, Suite 4100 Los Angeles, CA 90071-3151	Erica Van Loon 213-629-6000	Legal services				\$113,696.15
Pittsburgh Logistics Systems, Inc. 2000 Westinghouse Drive, Suite 201 Cranberry Twp, PA 16066	remit@plslogistics.com	Trade Debt				\$1,400.00
Power Digital Marketing Inc. 2251 San Diego Avenue, Suite A250 San Diego, CA 92110	619-501-1211	Marketing				\$6,500.00
Sterling Law Office LLC 112 S. Sangamon Street, Suite 101 Chicago, IL 60607		Legal services				\$237.50

Fill in this information to identify the case:Debtor name Immersive Art Space LPUnited States Bankruptcy Court for the: DISTRICT OF DELAWARE

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☐ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☐ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☐ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☐ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☐ *Schedule H: Codebtors* (Official Form 206H)
- ☐ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule*
- ☒ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on May 30, 2025**X /s/ Michael Willetts**

Signature of individual signing on behalf of debtor

Michael Willetts

Printed name

Authorized Agent

Position or relationship to debtor

**United States Bankruptcy Court
District of Delaware**

In re **Immersive Art Space LP**

Debtor(s)

Case No.

Chapter

11

VERIFICATION OF CREDITOR MATRIX

I, the Authorized Agent of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: **May 30, 2025**

/s/ Michael Willetts

Michael Willetts/Authorized Agent

Signer/Title

031165 USA, Inc.
1201 N. Orange Street, Suite 762
Wilmington, DE 19801

14039483 Canada Inc.
1480 Howe St 30036
Vancouver BC V6Z 1C4
CANADA

City of Chicago
Department of Law
c/o Jason L. Rubin
2 N. LaSalle Street, Suite 440
Chicago, IL 60602

Civil Actions Bureau-Municipal Litigation
Cook County State's Attorney's Office
Attn: Aaron McKerry
500 Richard J. Daley Center
Chicago, IL 60602

Cloud Space Inc.
301-5399 Eglinton Avenue W
Etobicoke, ON M9C 5K6
CANADA

Cook County Treasurer's Office
118 North Clark Street, Room 112
Chicago, IL 60602

Department of Administrative Hearings
400 W. Superior Street
Chicago, IL 60654

Duane Morris LLP
305 17th Street
Philadelphia, PA 19103

Fern Hill Company
c/o Nick Anderson
500 West Madison Avenue
Suite 1000 A35
Chicago, IL 60605

Fireflyhigh, Inc.
1452 S. Peoria St.
Chicago, IL 60608

Germania Plaza, LLC
c/o R2 Core 108, LLC

108 W. Germania Place
Chicago, IL 60610

Illinois Department of Revenue
555 West Monroe, Suite 1100
Chicago, IL 60661

Internal Revenue Service
Insolvency Operations
PO Box 21126
Philadelphia, PA 19114

Law Offices of Lori A. Goldstein, LLC
1787 Orchard Lane #8355
Northfield, IL 60093

Lighthouse Immersive Inc USD
1201 N. Orange Street, Suite 762
Wilmington, DE 19801

Lighthouse Immersive Inc.
640 Briar Hill Avenue
Toronto, ON M5N 1N2
CANADA

Nixon Peabody LLP
c/o Erica Van Loon
300 South Grand Avenue, Suite 4100
Los Angeles, CA 90071-3151

Pittsburgh Logistics Systems, Inc.
2000 Westinghouse Drive, Suite 201
Cranberry Twp, PA 16066

Power Digital Marketing Inc.
2251 San Diego Avenue, Suite A250
San Diego, CA 92110

R2 Core 108, LLC
c/o R2 Property Management, LLC
Attn: Marc Garrison
1315 N. North Branch Street, Suite D
Chicago, IL 60642

Sterling Law Office LLC
112 S. Sangamon Street, Suite 101
Chicago, IL 60607

2022 TAX RETURN FILING INSTRUCTIONS

U.S. RETURN OF PARTNERSHIP INCOME

FOR THE YEAR ENDING

December 31, 2022

Prepared For:

IMMERSIVE ART SPACE, LP
c/o Waldman Hirsch
3 Second Street, Suite 204
Jersey City, NJ 07311

Prepared By:

WALDMAN HIRSCH AND CO LLP
Harborside 10, 3 2nd St, Suite 204
Jersey City, NJ 07311

To Be Signed and Dated By:

A general partner

Amount of Tax:

Not applicable

Mail Tax Return To:

This return has qualified for electronic filing. After reviewing your return for completeness and accuracy, please sign Form 8879-PE and contact our office to confirm that your return can be filed electronically.

Forms to be Distributed to Partners:

Enclosed are copies of Schedule K-1 to be distributed to the partners.

Return Must be Mailed On or Before:

Return federal Form 8879-PE to us by September 15, 2023.

Special Instructions:

Do not mail the paper copy of the return to the IRS.

***** THIS IS NOT A FILEABLE COPY *****

Form **8879-PE**Department of the Treasury
Internal Revenue Service**E-file Authorization for Form 1065**

(For return of partnership income or administrative adjustment request)

ERO must obtain and retain completed Form 8879-PE.
Go to www.irs.gov/Form8879PE for the latest information.

OMB No. 1545-0123

2022

For calendar year 2022, or tax year beginning

, 2022, ending

, 20

Name of partnership **IMMERSIVE ART SPACE, LP**
C/O WALDMAN HIRSCHEmployer identification number
85-4007578**Part I Form 1065 Information** (Whole dollars only)

1	Gross receipts or sales less returns and allowances (Form 1065, line 1c)	1	11,179,286.
2	Gross profit (Form 1065, line 3)	2	8,490,098.
3	Ordinary business income (loss) (Form 1065, line 22)	3	-1,199,720.
4	Net rental real estate income (loss) (Form 1065, Schedule K, line 2)	4	
5	Other net rental income (loss) (Form 1065, Schedule K, line 3c)	5	

Part II Declaration and Signature Authorization of Partner or Member or Partnership Representative

I declare under penalties of perjury that:

- 1a. If the Form 1065 is being transmitted as part of a return of partnership income, I am a partner or member of the named partnership.
- b. If the Form 1065 is being transmitted as part of an administrative adjustment request (AAR), I am the partnership representative (PR) of the named partnership.
2. I have examined a copy of the partnership's electronic Form 1065 (whether used as return or AAR) and accompanying forms, schedules, and statements, and to the best of my knowledge and belief, it/they is/are true, correct, and complete.
3. I am fully authorized to sign the return or AAR on behalf of the partnership.
4. The amounts shown in Part I above are the amounts shown on the electronic copy of the partnership's Form 1065.
5. I consent to allow my electronic return originator (ERO), transmitter, or intermediate service provider to transmit the partnership's return or AAR to the IRS and to receive from the IRS (a) an acknowledgment of receipt or reason for rejection of the transmission and (b) the reason for any delay in processing the return or AAR.
6. I have selected a personal identification number (PIN) as my signature for the partnership's electronic return of partnership income or AAR.

Partner's or Member or PR PIN: check one box only

☒ I authorize WALDMAN HIRSCH AND CO LLP to enter my PIN
ERO firm name **Don't enter all zeros**
as my signature on the partnership's 2022 electronically filed return of partnership income or AAR.

☐ As a Partner or Member or PR of the partnership, I will enter my PIN as my signature on the partnership's 2022 electronically filed return of partnership income or AAR..

Partner or Member or PR signature: _____ ****** THIS IS NOT A FILEABLE COPY ******
Title: PARTNER Date: _____

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.

Don't enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2022 electronically filed return of partnership income or AAR for the partnership indicated above. I confirm that I am submitting this return or AAR in accordance with the requirements of **Pub. 3112**, IRS *e-file* Application and Participation, and **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS *e-file* Providers for Business Returns.

ERO's signature: WALDMAN HIRSCH AND CO LLP Date: 09/11/23

ERO Must Retain This Form - See Instructions
Don't Submit This Form to the IRS Unless Requested To Do So

For Paperwork Reduction Act Notice, see instructions.

Form **8879-PE** (2022)

Form **1065**Department of the Treasury
Internal Revenue ServiceFor calendar year 2022, or tax year beginning _____, ending _____
Go to www.irs.gov/Form1065 for instructions and the latest information.

OMB No. 1545-0123

2022

A Principal business activity CULTURAL EVENTS	Type or Print	Name of partnership IMMERSIVE ART SPACE, LP C/O WALDMAN HIRSCH	D Employer identification number 85-4007578
B Principal product or service THEATER		Number, street, and room or suite no. If a P.O. box, see instructions. 3 SECOND STREET, SUITE 204	E Date business started 11/17/2020
C Business code number 713900		City or town, state or province, country, and ZIP or foreign postal code JERSEY CITY NJ 07311	F Total assets (see instr.) \$15,793,891.

G Check applicable boxes: (1) ☐ Initial return (2) ☐ Final return (3) ☐ Name change (4) ☐ Address change (5) ☐ Amended return

H Check accounting method: (1) ☐ Cash (2) ☒ Accrual (3) ☐ Other (specify) _____

I Number of Schedules K-1. Attach one for each person who was a partner at any time during the tax year **3**

J Check if Schedules C and M-3 are attached ☐

K Check if partnership: (1) ☐ Aggregated activities for section 465 at-risk purposes (2) ☐ Grouped activities for section 469 passive activity purposes

Caution: Include **only** trade or business income and expenses on lines 1a through 22 below. See instructions for more information.

Income	1 a Gross receipts or sales	1a	11,179,286.	
	b Returns and allowances	1b		
	c Balance. Subtract line 1b from line 1a		1c	11,179,286.
	2 Cost of goods sold (attach Form 1125-A)		2	2,689,188.
	3 Gross profit. Subtract line 2 from line 1c		3	8,490,098.
	4 Ordinary income (loss) from other partnerships, estates, and trusts (attach statement)		4	
	5 Net farm profit (loss) (attach Schedule F (Form 1040))		5	
	6 Net gain (loss) from Form 4797, Part II, line 17 (attach Form 4797)		6	
7 Other income (loss) (attach statement)	SEE STATEMENT 2	7	214,003.	
8 Total income (loss). Combine lines 3 through 7		8	8,704,101.	
Deductions (see instructions for limitations)	9 Salaries and wages (other than to partners) (less employment credits)		9	1,524,203.
	10 Guaranteed payments to partners		10	
	11 Repairs and maintenance		11	51,426.
	12 Bad debts		12	
	13 Rent		13	744,000.
	14 Taxes and licenses	SEE STATEMENT 3	14	120,008.
	15 Interest (see instructions)		15	
	16 a Depreciation (if required, attach Form 4562)	16a	243,119.	
	b Less depreciation reported on Form 1125-A and elsewhere on return	16b		16c
	17 Depletion (Do not deduct oil and gas depletion.)		17	
	18 Retirement plans, etc.		18	
19 Employee benefit programs		19	69,063.	
20 Other deductions (attach statement)	SEE STATEMENT 4	20	7,152,002.	
21 Total deductions. Add the amounts shown in the far right column for lines 9 through 20		21	9,903,821.	
22 Ordinary business income (loss). Subtract line 21 from line 8		22	-1,199,720.	
Tax and Payment	23 Interest due under the look-back method-completed long-term contracts (attach Form 8697)		23	
	24 Interest due under the look-back method-income forecast method (attach Form 8866)		24	
	25 BBA AAR imputed underpayment (see instructions)		25	
	26 Other taxes (see instructions)		26	
	27 Total balance due. Add lines 23 through 26		27	
	28 Payment (see instructions)		28	
	29 Amount owed. If line 28 is smaller than line 27, enter amount owed		29	
	30 Overpayment. If line 28 is larger than line 27, enter overpayment		30	

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than partner or limited liability company member) is based on all information of which preparer has any knowledge.		
	Signature of partner or limited liability company member _____ Date _____		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	Firm's name		09/11/23
	WALDMAN HIRSCH AND CO LLP		Check <input type="checkbox"/> if self-employed
	Firm's address		PTIN
HARBORSIDE 10, 3 2ND ST, SUITE 204			
JERSEY CITY, NJ 07311		Firm's EIN	5694
		Phone no.	(212) 643-4422

Schedule B Other Information

1 What type of entity is filing this return? Check the applicable box:				Yes	No
a <input type="checkbox"/> Domestic general partnership	b <input checked="" type="checkbox"/> Domestic limited partnership				
c <input type="checkbox"/> Domestic limited liability company	d <input type="checkbox"/> Domestic limited liability partnership				
e <input type="checkbox"/> Foreign partnership	f <input type="checkbox"/> Other				
2 At the end of the tax year:					
a Did any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, or tax-exempt organization, or any foreign government own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? For rules of constructive ownership, see instructions. If "Yes," attach Schedule B-1, Information on Partners Owning 50% or More of the Partnership				X	
b Did any individual or estate own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? For rules of constructive ownership, see instructions. If "Yes," attach Schedule B-1, Information on Partners Owning 50% or More of the Partnership					X
3 At the end of the tax year, did the partnership:					
a Own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of stock entitled to vote of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (iv) below					X
(i) Name of Corporation		(ii) Employer Identification Number (if any)	(iii) Country of Incorporation	(iv) Percentage Owned in Voting Stock	
b Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below					X
(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Maximum Percentage Owned in Profit, Loss, or Capital	
4 Does the partnership satisfy all four of the following conditions?				Yes	No
a The partnership's total receipts for the tax year were less than \$250,000.					
b The partnership's total assets at the end of the tax year were less than \$ 1 million.					
c Schedules K-1 are filed with the return and furnished to the partners on or before the due date (including extensions) for the partnership return.					
d The partnership is not filing and is not required to file Schedule M-3					X
If "Yes," the partnership is not required to complete Schedules L, M-1, and M-2; item F on page 1 of Form 1065; or item L on Schedule K-1.					
5 Is this partnership a publicly traded partnership, as defined in section 469(k)(2)?					X
6 During the tax year, did the partnership have any debt that was canceled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt?					X
7 Has this partnership filed, or is it required to file, Form 8918, Material Advisor Disclosure Statement, to provide information on any reportable transaction?					X
8 At any time during calendar year 2022, did the partnership have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country					X
9 At any time during the tax year, did the partnership receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," the partnership may have to file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts. See instructions					X
10 a Is the partnership making, or had it previously made (and not revoked), a sec. 754 election? See instr. for details regarding a sec. 754 election ...					X
b Did the partnership make for this tax year an optional basis adjustment under section 743(b) or 734(b)? If "Yes," attach a statement showing the computation and allocation of the basis adjustment. See instructions					X
c Is the partnership required to adjust the basis of partnership assets under section 743(b) or 734(b) because of a substantial built-in loss (as defined under section 743(d)) or substantial basis reduction (as defined under section 734(d))? If "Yes," attach a statement showing the computation and allocation of the basis adjustment. See instruction					X

Form 1065 (2022)

IMMERSIVE ART SPACE, LP C/O WALDMAN HIRS

85-4007578 Page 3

Schedule B Other Information (continued)

	Yes	No
11 Check this box if, during the current or prior tax year, the partnership distributed any property received in a like-kind exchange or contributed such property to another entity (other than disregarded entities wholly owned by the partnership throughout the tax year) <input type="checkbox"/>		
12 At any time during the tax year, did the partnership distribute to any partner a tenancy-in-common or other undivided interest in partnership property?		X
13 If the partnership is required to file Form 8858, Information Return of U.S. Persons With Respect to Foreign Disregarded Entities (FDEs) and Foreign Branches (FBs), enter the number of Forms 8858 attached. See instructions		
14 Does the partnership have any foreign partners? If "Yes," enter the number of Forms 8805, Foreign Partner's Information Statement of Section 1446 Withholding Tax, filed for this partnership		X
15 Enter the number of Forms 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships, attached to this return		
16 a Did you make any payments in 2022 that would require you to file Form(s) 1099? See instructions		X
b If "Yes," did you or will you file required Form(s) 1099?		
17 Enter the number of Forms 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations, attached to this return		
18 Enter the number of partners that are foreign governments under section 892		
19 During the partnership's tax year, did the partnership make any payments that would require it to file Form 1042 and 1042-S under chapter 3 (sections 1441 through 1464) or chapter 4 (sections 1471 through 1474)?		X
20 Was the partnership a specified domestic entity required to file Form 8938 for the tax year? See the Instructions for Form 8938		X
21 Is the partnership a section 721(c) partnership, as defined in Regulations section 1.721(c)-1(b)(14)?		X
22 During the tax year, did the partnership pay or accrue any interest or royalty for which one or more partners are not allowed a deduction under section 267A? See instructions If "Yes," enter the total amount of the disallowed deductions \$		X
23 Did the partnership have an election under section 163(j) for any real property trade or business or any farming business in effect during the tax year? See instructions		X
24 Does the partnership satisfy one or more of the following? See instructions a The partnership owns a pass-through entity with current, or prior year carryover, excess business interest expense. b The partnership's aggregate average annual gross receipts (determined under section 448(c)) for the 3 tax years preceding the current tax year are more than \$27 million and the partnership has business interest expense. c The partnership is a tax shelter (see instructions) and the partnership has business interest expense. If "Yes" to any, complete and attach Form 8990.		X
25 Is the partnership attaching Form 8996 to certify as a Qualified Opportunity Fund? If "Yes," enter the amount from Form 8996, line 15 \$		X
26 Enter the number of foreign partners subject to section 864(c)(8) as a result of transferring all or a portion of an interest in the partnership or of receiving a distribution from the partnership Complete Schedule K-3 (Form 1065), Part XIII, for each foreign partner subject to section 864(c)(8) on a transfer or distribution.		
27 At any time during the tax year, were there any transfers between the partnership and its partners subject to the disclosure requirements of Regulations section 1.707-8?		X
28 Since December 22, 2017, did a foreign corporation directly or indirectly acquire substantially all of the properties constituting a trade or business of your partnership, and was the ownership percentage (by vote or value) for purposes of section 7874 greater than 50% (for example, the partners held more than 50% of the stock of the foreign corporation)? If "Yes," list the ownership percentage by vote and by value. See instructions. Percentage: By vote By value		X
29 Reserved for future use		
30 Is the partnership electing out of the centralized partnership audit regime under section 6221(b)? See instructions If "Yes," the partnership must complete Sch. B-2 (Form 1065). Enter the total from Sch. B-2, Part III, line 3 If "No," complete Designation of Partnership Representative below.		X

Designation of Partnership Representative (see instructions)

Enter below the information for the partnership representative (PR) for the tax year covered by this return.

Name of PR **LIGHTHOUSE IMMERSIVE USA INC**

U.S. address of PR

U.S. phone
number of PRIf the PR is an entity, name of the designated individual for the PR **COREY ROSS**U.S. address of
designated
individual**C/O WALDMAN HIRSCH 3 2ND ST SUITE 2
JERSEY CITY, NJ 07311**U.S. phone
number of
designated
individual

Schedule K Partners' Distributive Share Items		Total amount	
Income (Loss)	1 Ordinary business income (loss) (page 1, line 22)	1	-1,199,720.
	2 Net rental real estate income (loss) (attach Form 8825)	2	
	3a Other gross rental income (loss)	3a	
	b Expenses from other rental activities (attach statement)	3b	
	c Other net rental income (loss). Subtract line 3b from line 3a	3c	
	4 Guaranteed payments: a Services 4a b Capital 4b		
	c Total. Add lines 4a and 4b	4c	
	5 Interest income	5	
	6 Dividends and dividend equivalents: a Ordinary dividends	6a	
	b Qualified dividends 6b c Dividend equivalents 6c		
	7 Royalties	7	
8 Net short-term capital gain (loss) (attach Schedule D (Form 1065))	8		
9a Net long-term capital gain (loss) (attach Schedule D (Form 1065))	9a		
b Collectibles (28%) gain (loss)	9b		
c Unrecaptured section 1250 gain (attach statement)	9c		
10 Net section 1231 gain (loss) (attach Form 4797)	10		
11 Other income (loss) (see instructions) Type	11		
Deductions	12 Section 179 deduction (attach Form 4562)	12	
	13a Contributions	13a	
	b Investment interest expense	13b	
	c Section 59(e)(2) expenditures: (1) Type (2) Amount	13c(2)	
d Other deductions (see instructions) Type	13d		
Self-Employment	14a Net earnings (loss) from self-employment	14a	-2,399.
	b Gross farming or fishing income	14b	
	c Gross nonfarm income	14c	17,408.
Credits	15a Low-income housing credit (section 42(j)(5))	15a	
	b Low-income housing credit (other)	15b	
	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable)	15c	
	d Other rental real estate credits (see instructions) Type	15d	
	e Other rental credits (see instructions) Type	15e	
	f Other credits (see instructions) Type	15f	
International	16 Attach Schedule K-2 (Form 1065), Partners' Distributive Share Items-International, and check this box to indicate that you are reporting items of international tax relevance <input type="checkbox"/>		
Alternative Minimum Tax (AMT) Items	17a Post-1986 depreciation adjustment	17a	
	b Adjusted gain or loss	17b	
	c Depletion (other than oil and gas)	17c	
	d Oil, gas, and geothermal properties - gross income	17d	
	e Oil, gas, and geothermal properties - deductions	17e	
	f Other AMT items (attach statement)	17f	
Other Information	18a Tax-exempt interest income	18a	
	b Other tax-exempt income	18b	
	c Nondeductible expenses	18c	
	19a Distributions of cash and marketable securities	19a	
	b Distributions of other property	19b	
	20a Investment income	20a	
	b Investment expenses	20b	
	c Other items and amounts (attach statement) STMT 5		
	21 Total foreign taxes paid or accrued	21	

Analysis of Net Income (Loss) per Return

1 Net income (loss). Combine Schedule K, lines 1 through 11. From the result, subtract the sum of Schedule K, lines 12 through 13d, and 21						1	-1,199,720.
2 Analysis by partner type:	(i) Corporate	(ii) Individual (active)	(iii) Individual (passive)	(iv) Partnership	(v) Exempt Organization	(vi) Nominee/Other	
a General partners				-2,399.			
b Limited partners	-1,197,321.						

Schedule L Balance Sheets per Books

Assets	Beginning of tax year		End of tax year	
	(a)	(b)	(c)	(d)
1 Cash		8,379,258.		4,830,155.
2a Trade notes and accounts receivable	15,984.		2,354.	
b Less allowance for bad debts		15,984.		2,354.
3 Inventories				
4 U.S. government obligations				
5 Tax-exempt securities				
6 Other current assets (attach statement)	STATEMENT 6	7,826,495.		10,220,900.
7a Loans to partners (or persons related to partners)				
b Mortgage and real estate loans				
8 Other investments (attach statement)				
9a Buildings and other depreciable assets	1,156,047.		740,482.	
b Less accumulated depreciation		1,156,047.		740,482.
10a Depletable assets				
b Less accumulated depletion				
11 Land (net of any amortization)				
12a Intangible assets (amortizable only)				
b Less accumulated amortization				
13 Other assets (attach statement)	STATEMENT 7	346,295.		
14 Total assets		17,724,079.		15,793,891.
Liabilities and Capital				
15 Accounts payable		665,571.		569,015.
16 Mortgages, notes, bonds payable in less than 1 year				
17 Other current liabilities (attach statement)	STATEMENT 8	6,350,813.		5,811,997.
18 All nonrecourse loans				
19a Loans from partners (or persons related to partners)				
b Mortgages, notes, bonds payable in 1 year or more				
20 Other liabilities (attach statement)				
21 Partners' capital accounts		10,707,695.		9,412,879.
22 Total liabilities and capital		17,724,079.		15,793,891.

Schedule M-1 Reconciliation of Income (Loss) per Books With Analysis of Net Income (Loss) per Return

Note: The partnership may be required to file Schedule M-3. See instructions.

1 Net income (loss) per books		6 Income recorded on books this year not included on Schedule K, lines 1 through 11 (itemize):	
2 Income included on Schedule K, lines 1, 2, 3c, 5, 6a, 7, 8, 9a, 10, and 11, not recorded on books this year (itemize):		a Tax-exempt interest \$	
3 Guaranteed payments (other than health insurance)		7 Deductions included on Schedule K, lines 1 through 13d, and 21, not charged against book income this year (itemize):	
4 Expenses recorded on books this year not included on Schedule K, lines 1 through 13d, and 21 (itemize):		a Depreciation \$	
a Depreciation \$		8 Add lines 6 and 7	
b Travel and entertainment \$		9 Income (loss) (Analysis of Net Income (Loss), line 1). Subtract line 8 from line 5	
5 Add lines 1 through 4			

Schedule M-2 Analysis of Partners' Capital Accounts

1 Balance at beginning of year	9,842,272.	6 Distributions: a Cash	
2 Capital contributed: a Cash		b Property	
b Property		7 Other decreases (itemize):	
3 Net income (loss) (see instructions)	-1,199,720.	8 Add lines 6 and 7	
4 Other increases (itemize):		9 Balance at end of year. Subtract line 8 from line 5	8,642,552.
5 Add lines 1 through 4	8,642,552.		

Form **1125-A****Cost of Goods Sold**

(Rev. November 2018)

▶ **Attach to Form 1120, 1120-C, 1120-F, 1120S, or 1065.**

OMB No. 1545-0123

Department of the Treasury

▶ **Go to www.irs.gov/Form1125A for the latest information.**

Internal Revenue Service

Name **IMMERSIVE ART SPACE, LP**
C/O WALDMAN HIRSCH

Employer identification number

85-4007578

1	Inventory at beginning of year	1	
2	Purchases	2	
3	Cost of labor	3	
4	Additional section 263A costs (attach schedule)	4	
5	Other costs (attach schedule) SEE STATEMENT 9	5	2,689,188.
6	Total. Add lines 1 through 5	6	2,689,188.
7	Inventory at end of year	7	
8	Cost of goods sold. Subtract line 7 from line 6. Enter here and on Form 1120, page 1, line 2 or the appropriate line of your tax return. See instructions	8	2,689,188.

9 a Check all methods used for valuing closing inventory:

- (i) ☐ Cost
- (ii) ☐ Lower of cost or market
- (iii) ☐ Other (Specify method used and attach explanation) ▶ _____

b Check if there was a writedown of subnormal goods ▶ ☐**c** Check if the LIFO inventory method was adopted this tax year for any goods (if checked, attach Form 970) ▶ ☐**d** If the LIFO inventory method was used for this tax year, enter amount of closing inventory computed under LIFO **9d** |**e** If property is produced or acquired for resale, do the rules of Section 263A apply to the entity? See instructions ☐ Yes ☒ No**f** Was there any change in determining quantities, cost, or valuations between opening and closing inventory? ☐ Yes ☒ No
If "Yes," attach explanation.

For Paperwork Reduction Act Notice, see separate instructions.

Form 1125-A (Rev. 11-2018)

**SCHEDULE B-1
(Form 1065)**(Rev. August 2019)
Department of the Treasury
Internal Revenue Service**Information on Partners Owning 50% or
More of the Partnership**

▶ Attach to Form 1065.

OMB No. 1545-0123

▶ Go to www.irs.gov/Form1065 for the latest information.

Name of partnership

Employer identification number

**IMMERSIVE ART SPACE, LP
C/O WALDMAN HIRSCH****85-4007578****Part I Entities Owning 50% or More of the Partnership** (Form 1065, Schedule B, Question 2a (Question 3a for 2009 through 2017))

Complete columns (i) through (v) below for any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, tax-exempt organization, or any foreign government that owns, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership (see instructions).

(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Maximum Percentage Owned in Profit, Loss, or Capital
LIGHTHOUSE IMMERSIVE USA INC	2401	CORPORATION	UNITED STATES	69.90

Part II Individuals or Estates Owning 50% or More of the Partnership (Form 1065, Schedule B, Question 2b (Question 3b for 2009 through 2017))

Complete columns (i) through (iv) below for any individual or estate that owns, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership (see instructions).

(i) Name of Individual or Estate	(ii) Identifying Number (if any)	(iii) Country of Citizenship (see instructions)	(iv) Maximum Percentage Owned in Profit, Loss, or Capital

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 1065.

Schedule B-1 (Form 1065) (Rev. 8-2019)

SCHEDULE M-3

(Form 1065)

(Rev. December 2021)
Department of the Treasury
Internal Revenue Service**Net Income (Loss) Reconciliation
for Certain Partnerships**

▶ Attach to Form 1065.

OMB No. 1545-0123

▶ Go to www.irs.gov/Form1065 for instructions and the latest information.

Name of partnership

**IMMERSIVE ART SPACE, LP
C/O WALDMAN HIRSCH**

Employer identification number

85-4007578**This Schedule M-3 is being filed because (check all that apply):**

- A** ☒ The amount of the partnership's total assets at the end of the tax year is equal to \$10 million or more.
- B** ☒ The amount of the partnership's adjusted total assets for the tax year is equal to \$10 million or more. If box B is checked, enter the amount of adjusted total assets for the tax year **16,993,611.**
- C** ☐ The amount of total receipts for the tax year is equal to \$35 million or more. If box C is checked, enter the total receipts for the tax year _____.
- D** ☐ An entity that is a reportable entity partner with respect to the partnership owns or is deemed to own an interest of 50% or more in the partnership's capital, profit, or loss on any day during the tax year of the partnership.

Name of Reportable Entity Partner	Identifying Number	Maximum Percentage Owned or Deemed Owned

E ☐ Voluntary filer.**Part I Financial Information and Net Income (Loss) Reconciliation****1a** Did the partnership file SEC Form 10-K for its income statement period ending with or within this tax year?

- ☐ **Yes.** Skip lines 1b and 1c and complete lines 2 through 11 with respect to that SEC Form 10-K.
- ☒ **No.** Go to line 1b. See instructions if multiple non-tax-basis income statements are prepared.

b Did the partnership prepare a certified audited non-tax-basis income statement for that period?

- ☐ **Yes.** Skip line 1c and complete lines 2 through 11 with respect to that income statement.
- ☒ **No.** Go to line 1c.

c Did the partnership prepare a non-tax-basis income statement for that period?

- ☒ **Yes.** Complete lines 2 through 11 with respect to that income statement.
- ☐ **No.** Skip lines 2 through 3b and enter the partnership's net income (loss) per its books and records on line 4a.

2 Enter the income statement period: Beginning **01/01/2022** Ending **12/31/2022****3a** Has the partnership's income statement been restated for the income statement period on line 2?

- ☐ **Yes.** (If "Yes," attach a statement and the amount of each item restated.)
- ☒ **No.**

b Has the partnership's income statement been restated for any of the 5 income statement periods immediately preceding the period on line 2?

- ☐ **Yes.** (If "Yes," attach a statement and the amount of each item restated.)
- ☒ **No.**

4a Worldwide consolidated net income (loss) from income statement source identified on Part I, line 1	4a	-787,112.
b Indicate accounting standard used for line 4a. See instructions.		
1 <input checked="" type="checkbox"/> GAAP	2 <input type="checkbox"/> IFRS	3 <input type="checkbox"/> Section 704(b)
4 <input type="checkbox"/> Tax-basis	5 <input type="checkbox"/> Other (specify) ▶	
5a Net income from nonincludible foreign entities (attach statement)	5a	()
b Net loss from nonincludible foreign entities (attach statement and enter as a positive amount)	5b	
6a Net income from nonincludible U.S. entities (attach statement)	6a	()
b Net loss from nonincludible U.S. entities (attach statement and enter as a positive amount)	6b	
7a Net income (loss) of other foreign disregarded entities (attach statement)	7a	
b Net income (loss) of other U.S. disregarded entities (attach statement)	7b	
8 Adjustment to eliminations of transactions between includible entities and nonincludible entities (attach stmt.)	8	
9 Adjustment to reconcile income statement period to tax year (attach statement)	9	
10 Other adjustments to reconcile to amount on line 11 (attach statement)	10	
11 Net income (loss) per income statement of the partnership. Combine lines 4a through 10	11	-787,112.

Note: Part I, line 11, must equal Part II, line 26, column (a); or Form 1065, Schedule M-1, line 1. See instructions.**12** Enter the total amount (not just the partnership's share) of the assets and liabilities of all entities included or removed on the following lines.

	Total Assets	Total Liabilities
a Included on Part I, line 4	15,793,891.	6,381,012.
b Removed on Part I, line 5		
c Removed on Part I, line 6		
d Included on Part I, line 7		

For Paperwork Reduction Act Notice, see the instructions for your return.**Schedule M-3 (Form 1065) (Rev. 12-2021)**

Name of partnership **IMMERSIVE ART SPACE, LP**
C/O WALDMAN HIRSCH

Employer identification number
85-4007578

Part II Reconciliation of Net Income (Loss) per Income Statement of Partnership With Income (Loss) per Return

Income (Loss) Items	(a) Income (Loss) per Income Statement	(b) Temporary Difference	(c) Permanent Difference	(d) Income (Loss) per Tax Return
Attach statements for lines 1 through 10.				
1 Income (loss) from equity method foreign corporations				
2 Gross foreign dividends not previously taxed				
3 Subpart F, QEF, and similar income inclusions				
4 Gross foreign distributions previously taxed				
5 Income (loss) from equity method U.S. corporations				
6 U.S. dividends				
7 Income (loss) from U.S. partnerships				
8 Income (loss) from foreign partnerships				
9 Income (loss) from other pass- through entities				
10 Items relating to reportable transactions				
11 Interest income (see instructions)				
12 Total accrual to cash adjustment				
13 Hedging transactions				
14 Mark-to-market income (loss)				
15 Cost of goods sold (see instructions)	(2,689,188.)			(2,689,188.)
16 Sale versus lease (for sellers and/or lessors)				
17 Section 481(a) adjustments				
18 Unearned/deferred revenue				
19 Income recognition from long-term contracts				
20 Original issue discount and other imputed interest				
21a Income statement gain/loss on sale, exchange, abandonment, worthlessness, or other disposition of assets other than inventory and pass-through entities				
b Gross capital gains from Schedule D, excluding amounts from pass-through entities				
c Gross capital losses from Schedule D, excluding amounts from pass-through entities, abandonment losses, and worthless stock losses				
d Net gain/loss reported on Form 4797, line 17, excluding amounts from pass-through entities, abandonment losses, and worthless stock losses ...				
e Abandonment losses				
f Worthless stock losses (attach statement)				
g Other gain/loss on disposition of assets other than inventory Other income (loss) items with differences (attach statement)				
22				
23 Total income (loss) items. Combine lines 1 through 22	-2,689,188.			-2,689,188.
24 Total expense/deduction items. (From Part III, line 31) (see instructions)	-2,564,716.	-412,608.		-2,977,324.
25 Other items with no differences STMT 10	4,466,792.			4,466,792.
26 Reconciliation totals. Combine lines 23 through 25	-787,112.	-412,608.		-1,199,720.

Note: Line 26, column (a), must equal Part I, line 11, and column (d) must equal Form 1065, Analysis of Net Income (Loss), line 1.

Name of partnership **IMMERSIVE ART SPACE, LP**
C/O WALDMAN HIRSCH

Employer identification number
85-4007578

Part III Reconciliation of Net Income (Loss) per Income Statement of Partnership With Income (Loss) per Return - Expense/Deduction Items

Expense/Deduction Items	(a) Expense per Income Statement	(b) Temporary Difference	(c) Permanent Difference	(d) Deduction per Tax Return
1 State and local current income tax expense				
2 State and local deferred income tax expense				
3 Foreign current income tax expense (other than foreign withholding taxes)				
4 Foreign deferred income tax expense				
5 Equity-based compensation				
6 Meals and entertainment STMT 12	70,869.			70,869.
7 Fines and penalties				
8 Judgments, damages, awards, and similar costs				
9 Guaranteed payments				
10 Pension and profit-sharing				
11 Other post-retirement benefits				
12 Deferred compensation				
13 Charitable contribution of cash and tangible property				
14 Charitable contribution of intangible property				
15 Organizational expenses as per Regulations section 1.709-2(a)				
16 Syndication expenses as per Regulations section 1.709-2(b) ..				
17 Current year acquisition/reorganization investment banking fees				
18 Current year acquisition/reorganization legal and accounting fees				
19 Amortization/impairment of goodwill				
20 Amortization of acquisition, reorganization, and start-up costs				
21 Other amortization or impairment write-offs				
22 Reserved for future use				
23a Depletion - oil & gas				
b Depletion - other than oil & gas				
24 Intangible drilling and development costs (IDC)				
25 Depreciation		243,119.		243,119.
26 Bad debt expense				
27 Interest expense (see instructions)				
28 Purchase versus lease (for purchasers and/or lessees)				
29 Research and development costs				
30 Other expense/deduction items with differences (attach statement) STMT 13	2,493,847.	169,489.		2,663,336.
31 Total expense/deduction items. Combine lines 1 through 30. Enter here and on Part II, line 24, reporting positive amounts as negative and negative amounts as positive	2,564,716.	412,608.		2,977,324.

Schedule M-3 (Form 1065) (Rev. 12-2021)

Form **4562**Department of the Treasury
Internal Revenue Service**Depreciation and Amortization**
(Including Information on Listed Property)

OTHER

1

OMB No. 1545-0172

2022Attachment
Sequence No. **179**

Attach to your tax return.

Go to www.irs.gov/Form4562 for instructions and the latest information.

Name(s) shown on return

Business or activity to which this form relates

Identifying number

IMMERSIVE ART SPACE, LP
C/O WALDMAN HIRSCH

85-4007578

Part I Election To Expense Certain Property Under Section 179 **Note:** If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2021 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2023. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.**Part II** Special Depreciation Allowance and Other Depreciation (Don't include listed property.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year	14	243,119.
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Don't include listed property. See instructions.)**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2022	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

Section B - Assets Placed in Service During 2022 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property	/		27.5 yrs.	MM	S/L	
	/		27.5 yrs.	MM	S/L	
i Nonresidential real property	/		39 yrs.	MM	S/L	
	/			MM	S/L	

Section C - Assets Placed in Service During 2022 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 30-year	/		30 yrs.	MM	S/L	
d 40-year	/		40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	22	243,119.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Form 4562 (2022)

IMMERSIVE ART SPACE, LP C/O WALDMAN HIRS

85-4007578 Page 2

Part V**Listed Property** (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.**Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)****24a** Do you have evidence to support the business/investment use claimed? ☐ Yes ☐ No **24b** If "Yes," is the evidence written? ☐ Yes ☐ No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
--	-------------------------------------	--	-------------------------------	--	---------------------------	------------------------------	----------------------------------	---------------------------------------

25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use**25****26** Property used more than 50% in a qualified business use:

	:	:	%					
	:	:	%					
	:	:	%					

27 Property used 50% or less in a qualified business use:

	:	:	%			S/L -		
	:	:	%			S/L -		
	:	:	%			S/L -		

28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1**28****29** Add amounts in column (i), line 26. Enter here and on line 7, page 1**29****Section B - Information on Use of Vehicles**

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle	(b) Vehicle	(c) Vehicle	(d) Vehicle	(e) Vehicle	(f) Vehicle
30 Total business/investment miles driven during the year (don't include commuting miles)						
31 Total commuting miles driven during the year						
32 Total other personal (noncommuting) miles driven						
33 Total miles driven during the year. Add lines 30 through 32						
34 Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No
35 Was the vehicle used primarily by a more than 5% owner or related person?						
36 Is another vehicle available for personal use?						

Section C - Questions for Employers Who Provide Vehicles for Use by Their EmployeesAnswer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who **aren't** more than 5% owners or related persons.

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use?		

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.**Part VI Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
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42 Amortization of costs that begins during your 2022 tax year:

	:	:			
	:	:			

43 Amortization of costs that began before your 2022 tax year**43****44** **Total.** Add amounts in column (f). See the instructions for where to report**44**

Form **8916-A**
(Rev. November 2019)
Department of the Treasury
Internal Revenue Service

Supplemental Attachment to Schedule M-3

► Attach to Schedule M-3 for Form 1065, 1120, 1120-L, 1120-PC, or 1120-S.
► Go to www.irs.gov/Form1120 for the latest information.

OMB No. 1545-0123

Name of common parent IMMERSIVE ART SPACE, LP C/O WALDMAN HIRS	Employer identification number 85-4007578
Name of subsidiary	Employer identification number

Part I Cost of Goods Sold

Cost of Goods Sold Items	(a) Expense per Income Statement	(b) Temporary Difference	(c) Permanent Difference	(d) Deduction per Tax Return
1 Amounts attributable to cost flow assumptions				
2 Amounts attributable to:				
a Stock option expense				
b Other equity-based compensation				
c Meals and entertainment				
d Parachute payments				
e Compensation with section 162(m) limitation				
f Pension and profit sharing				
g Other post-retirement benefits				
h Deferred compensation				
i Reserved				
j Amortization				
k Depletion				
l Depreciation				
m Corporate-owned life insurance premiums ...				
n Other section 263A costs				
3 Inventory shrinkage accruals				
4 Excess inventory and obsolescence reserves				
5 Lower of cost or market write-downs				
6 Other items with differences (attach statement) SEE STATEMENT 15				
7 Other items with no differences	2,689,188.			2,689,188.
8 Total cost of goods sold. Add lines 1 through 7 in columns a, b, c, and d. Enter totals on the applicable Schedule M-3. See instructions ...	2,689,188.			2,689,188.

LHA For Paperwork Reduction Act Notice, see instructions.

Form **8916-A** (Rev. 11-2019)

Part II Interest Income

	Interest Income Item	(a) Income (Loss) per Income Statement	(b) Temporary Difference	(c) Permanent Difference	(d) Income (Loss) per Tax Return
1	Tax-exempt interest income				
2	Interest income from hybrid securities				
3	Sale/lease interest income				
4a	Intercompany interest income - From outside tax affiliated group				
4b	Intercompany interest income - From tax affiliated group				
5	Other interest income				
6	Total interest income. Add lines 1 through 5 in columns a, b, c, and d. Enter total on the applicable Schedule M-3. See instructions.				

Part III Interest Expense

	Interest Expense Item	(a) Expense per Income Statement	(b) Temporary Difference	(c) Permanent Difference	(d) Deduction per Tax Return
1	Interest expense from hybrid securities				
2	Lease/purchase interest expense				
3a	Intercompany interest expense - Paid to outside tax affiliated group				
3b	Intercompany interest expense - Paid to tax affiliated group				
4	Other interest expense				
5	Total interest expense. Add lines 1 through 4 in columns a, b, c, and d. Enter total on the applicable Schedule M-3. See instructions.				

Form **8990**
(Rev. December 2022)
Department of the Treasury
Internal Revenue Service

Limitation on Business Interest Expense Under Section 163(j)

Attach to your tax return.

OMB No. 1545-0123

Go to www.irs.gov/Form8990 for instructions and the latest information.

Taxpayer name(s) shown on tax return IMMERSIVE ART SPACE, LP C/O WALDMAN HIRS	Identification number 85-4007578
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A If Form 8990 relates to an information return for a foreign entity (for example, Form 5471), enter:

Name of foreign entity _____

Employer identification number, if any _____

Reference ID number _____

B Is the foreign entity a CFC group member? See instructions ☐ Yes ☐ No

C Is this Form 8990 filed by the specified group parent for an entire CFC group? See instructions ☐ Yes ☐ No

D Has a CFC or a CFC group made a safe harbor election? If yes, see instructions for which lines of Form 8990 to complete ☐ Yes ☐ No

Part I Computation of Allowable Business Interest Expense

Part I is completed by all taxpayers subject to section 163(j). Schedule A and Schedule B need to be completed before Part I when the taxpayer is a partner or shareholder of a pass-through entity subject to section 163(j).

Section I - Business Interest Expense

1 Current year business interest expense (not including floor plan financing interest expense), before the section 163(j) limitation	1		
2 Disallowed business interest expense carryforwards from prior years. (Does not apply to a partnership)	2		
3 Partner's excess business interest expense treated as paid or accrued in current year (Schedule A, line 44, column (h))	3		
4 Floor plan financing interest expense. See instructions	4		
5 Total business interest expense. Add lines 1 through 4	5		

Section II - Adjusted Taxable Income

Tentative Taxable Income

6 Tentative taxable income. See instructions	6	-1,199,720.
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Additions (adjustments to be made if amounts are taken into account on line 6)

7 Any item of loss or deduction that is not properly allocable to a trade or business of the taxpayer. See instructions	7		
8 Any business interest expense not from a pass-through entity. See instr.	8		
9 Amount of any net operating loss deduction under section 172	9		
10 Amount of any qualified business income deduction allowed under section 199A	10		
11 Reserved for future use	11		
12 Amount of any loss or deduction items from a pass-through entity. See instructions	12		
13 Other additions. See instructions	13		
14 Total current year partner's excess taxable income (Schedule A, line 44, column (f))	14		
15 Total current year S corporation shareholder's excess taxable income (Schedule B, line 46, column (c))	15		
16 Total. Add lines 7 through 15	16		

Reductions (adjustments to be made if amounts are taken into account on line 6)

17 Any item of income or gain that is not properly allocable to a trade or business of the taxpayer. See instructions	17	()	
18 Any business interest income not from a pass-through entity. See instructions	18	()	
19 Amount of any income or gain items from a pass-through entity. See instructions	19	()	
20 Other reductions. See instructions	20	()	
21 Total. Combine lines 17 through 20	21	()	
22 Adjusted taxable income. Combine lines 6, 16, and 21. See instructions	22		

Section III - Business Interest Income

23	Current year business interest income. See instructions	23		
24	Excess business interest income from pass-through entities (total of Schedule A, line 44, column (g), and Schedule B, line 46, column (d))	24		
25	Total. Add lines 23 and 24		25	

Section IV - Section 163(j) Limitation Calculations**Limitation on Business Interest Expense**

26	Multiply the adjusted taxable income from line 22 by the applicable percentage. See instructions	26		
27	Business interest income (line 25)	27		
28	Floor plan financing interest expense (line 4)	28		
29	Total. Add lines 26, 27, and 28		29	

Allowable Business Interest Expense

30	Total current year business interest expense deduction. See instructions	30	
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Carryforward

31	Disallowed business interest expense. Subtract line 29 from line 5. (If zero or less, enter -0-.)	31	
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Part II Partnership Pass-Through Items

Part II is only completed by a partnership that is subject to section 163(j). The partnership items below are allocated to the partners and are not carried forward by the partnership. See the instructions for more information.

Excess Business Interest Expense

32	Excess business interest expense. Enter amount from line 31	32	
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Excess Taxable Income (If you entered an amount on line 32, skip lines 33 through 37.)

33	Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0-.)	33	
34	Subtract line 33 from line 26. (If zero or less, enter -0-.)	34	
35	Divide line 34 by line 26. Enter the result as a decimal. (If line 26 is zero, enter -0-.)	35	
36	Excess taxable income. Multiply line 35 by line 22	36	

Excess Business Interest Income

37	Excess business interest income. Subtract the sum of lines 1, 2, and 3 from line 25. (If zero or less, enter -0-.)	37	
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Part III S Corporation Pass-Through Items

Part III is only completed by S corporations that are subject to section 163(j). The S corporation items below are allocated to the shareholders. See the instructions for more information.

Excess Taxable Income

38	Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0-.)	38	
39	Subtract line 38 from line 26. (If zero or less, enter -0-.)	39	
40	Divide line 39 by line 26. Enter the result as a decimal. (If line 26 is zero, enter -0-.)	40	
41	Excess taxable income. Multiply line 40 by line 22	41	

Excess Business Interest Income

42	Excess business interest income. Subtract the sum of lines 1, 2, and 3 from line 25. (If zero or less, enter -0-.)	42	
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IMMERSIVE ART SPACE, LP C/O WALDMAN HIRS

85-4007578

FOOTNOTES

STATEMENT 1

ELECTION STATEMENT ACCORDING TO SEC. 1.181-2(C)(2)(I)

THE NAME OF THE PRODUCTION: IMMERSIVE ART SPACE LP

THE DATE AGGREGATE PRODUCTION COSTS WERE FIRST PAID OR
INCURRED FOR THE PRODUCTION: 03/31/2022THE AMOUNT OF AGGREGATE PRODUCTION COSTS PAID OR INCURRED
FOR THE PRODUCTION DURING THE TAXABLE YEAR: 664,317.THE AMOUNT OF QUALIFIED COMPENSATION (AS DEFINED IN SEC.
1.181-3(D)) PAID OR INCURRED FOR THE PRODUCTION DURING THE
TAXABLE YEAR: 650.THE AMOUNT OF COMPENSATION (AS DEFINED IN SEC. 1.181-3(C))
PAID OR INCURRED FOR THE PRODUCTION DURING THE TAXABLE YEAR: 7,625.THE OWNER REASONABLY EXPECTS (BASED ON ALL OF THE FACTS AND
CIRCUMSTANCES AT THE TIME THE ELECTION IS MADE) BOTH THAT
THE PRODUCTION WILL BE SET FOR PRODUCTION (OR HAS BEEN SET
FOR PRODUCTION) AND WILL BE A QUALIFIED FILM OR TELEVISION
PRODUCTION.

FORM 1065

OTHER INCOME

STATEMENT 2

DESCRIPTION

AMOUNT

EXCHANGE GAIN	66,419.
PARKING REVENUE	141,686.
SPONSORSHIP INCOME	4,000.
VENDOR RELATED REFERRAL INCOME	1,898.
TOTAL TO FORM 1065, LINE 7	214,003.

FORM 1065

TAX EXPENSE

STATEMENT 3

DESCRIPTION

AMOUNT

PAYROLL TAXES	120,008.
TOTAL TO FORM 1065, LINE 14	120,008.

IMMERSIVE ART SPACE, LP C/O WALDMAN HIRS

85-4007578

FORM 1065

OTHER DEDUCTIONS

STATEMENT 4

DESCRIPTION	AMOUNT
ADMINISTRATIVE EXPENSE	131,086.
ADVERTISING	3,290,545.
LATE FILING INTEREST EXPENSE	214.
LICENSE AND PERMITS	33,974.
MEALS NOT SUBJECT TO LIMITATION	70,869.
MISCELLANEOUS EXPENSE	317.
OCCUPANCY COSTS	238,533.
OPERATING EXPENSES	278,520.
PAYROLL EXPENSES	74,576.
PRINTING	3,792.
PRIOR YEAR TRUE-UP ADJUSTMENT	507,837.
PRODUCTION EXPENSES	2,155,499.
PROFESSIONAL FEE	267,418.
PURCHASES	508.
SPECIAL EVENTS EXPENSE	6,600.
TRAVEL	91,714.
TOTAL TO FORM 1065, LINE 20	7,152,002.

SCHEDULE K

OTHER ITEMS

STATEMENT 5

DESCRIPTION	AMOUNT
GROSS RECEIPTS FOR SECTION 448(C)	11,179,286.
SECTION 199A - ORDINARY INCOME (LOSS)	-1,199,720.
SECTION 199A W-2 WAGES	1,524,203.
SECTION 199A UNADJUSTED BASIS OF ASSETS	780,553.

SCHEDULE L

OTHER CURRENT ASSETS

STATEMENT 6

DESCRIPTION	BEGINNING OF TAX YEAR	END OF TAX YEAR
DUE FROM INTERCOMPANY EMPLOYEE ADVANCES	7,826,495.	10,219,569. 1,331.
TOTAL TO SCHEDULE L, LINE 6	7,826,495.	10,220,900.

IMMERSIVE ART SPACE, LP C/O WALDMAN HIRS

85-4007578

SCHEDULE L	OTHER ASSETS	STATEMENT 7
DESCRIPTION	BEGINNING OF TAX YEAR	END OF TAX YEAR
DESIGN	346,295.	
TOTAL TO SCHEDULE L, LINE 13	346,295.	

SCHEDULE L	OTHER CURRENT LIABILITIES	STATEMENT 8
DESCRIPTION	BEGINNING OF TAX YEAR	END OF TAX YEAR
DUE TO INTERCOMPANY	5,014,741.	5,464,254.
MEDICAL AND DENTAL LIABILITY	10,657.	41,750.
SALES TAX PAYABLE	19,665.	9,501.
TIPS PAYABLE	17,358.	94,392.
UNEARNED REVENUE - TICKET SALES	1,288,392.	202,100.
TOTAL TO SCHEDULE L, LINE 17	6,350,813.	5,811,997.

FORM 1125-A	OTHER COSTS	STATEMENT 9
DESCRIPTION		AMOUNT
CAFE COST		215,512.
DALEWELL COST		
FOOD COST		2,893.
INTERCOMPANY COGS		
INTERCOMPANY MANAGEMENT FEES COGS		1,001,000.
INTERCOMPANY MERCH COGS		478,895.
INTERCOMPANY ROYALTIES COGS		360,397.
MERCHANDISE COST		77,006.
OTHER COST		3,434.
PACKAGE COSTS		
TICKETS COST		550,051.
TOTAL TO LINE 5		2,689,188.

IMMERSIVE ART SPACE, LP C/O WALDMAN HIRS

85-4007578

SCHEDULE M-3 OTHER INCOME (LOSS) AND EXPENSE / DEDUCTION STATEMENT 10
ITEMS WITH NO DIFFERENCES

DESCRIPTION	PER INCOME STATEMENT	PER TAX RETURN
OTHER INCOME (LOSS) - SEE STATEMENT	11,393,289.	11,393,289.
OTHER EXPENSE / DEDUCTION - SEE STATEMENT	-6,926,497.	-6,926,497.
TOTAL TO SCHEDULE M-3, PART II, LINE 25	4,466,792.	4,466,792.

SCHEDULE M-3 OTHER INCOME (LOSS) ITEMS WITH NO DIFFERENCES STATEMENT 11

DESCRIPTION	INCOME (LOSS) PER INCOME STATEMENT	INCOME (LOSS) PER TAX RETURN
EXCHANGE GAIN	66,419.	66,419.
PARKING REVENUE	141,686.	141,686.
SALES	11,179,286.	11,179,286.
SPONSORSHIP INCOME	4,000.	4,000.
VENDOR RELATED REFERRAL INCOME	1,898.	1,898.
TOTAL TO SCHEDULE M-3, PART II, LINE 25	11,393,289.	11,393,289.

SCHEDULE M-3 MEALS AND ENTERTAINMENT STATEMENT 12

DESCRIPTION	EXPENSE PER INCOME STATEMENT	TEMPORARY DIFFERENCE	PERMANENT DIFFERENCE	DEDUCTION PER TAX RETURN
MEALS AND ENTERTAINMENT FROM TRADE OR BUSINESS	70,869.		0.	70,869.
TOTAL	70,869.		0.	70,869.

IMMERSIVE ART SPACE, LP C/O WALDMAN HIRS

85-4007578

SCHEDULE M-3 OTHER EXPENSE/DEDUCTION ITEMS WITH DIFFERENCES STATEMENT 13

DESCRIPTION	EXPENSE/ DEDUCTION PER INCOME STATEMENT	TEMPORARY DIFFERENCE	PERMANENT DIFFERENCE	EXPENSE/ DEDUCTION PER TAX RETURN
PRIOR YEAR TRUE-UP ADJUSTMENT	0.	507,837.	0.	507,837.
PRODUCTION EXPENSES	2,493,847.	-338,348.	0.	2,155,499.
TOTAL TO M-3, PART III, LINE 30	2,493,847.	169,489.	0.	2,663,336.

SCHEDULE M-3 OTHER EXPENSE/DEDUCTION ITEMS STATEMENT 14
WITH NO DIFFERENCES

DESCRIPTION	EXPENSE/ DEDUCTION PER INCOME STATEMENT	EXPENSE/ DEDUCTION PER TAX RETURN
ADMINISTRATIVE EXPENSE	131,086.	131,086.
ADVERTISING	3,290,545.	3,290,545.
EMPLOYEE BENEFIT PROGRAMS	69,063.	69,063.
LATE FILING INTEREST EXPENSE	214.	214.
LICENSE AND PERMITS	33,974.	33,974.
MISCELLANEOUS EXPENSE	317.	317.
OCCUPANCY COSTS	238,533.	238,533.
OPERATING EXPENSES	278,520.	278,520.
PAYROLL EXPENSES	74,576.	74,576.
PAYROLL TAXES	120,008.	120,008.
PRINTING	3,792.	3,792.
PROFESSIONAL FEE	267,418.	267,418.
PURCHASES	508.	508.
RENT EXPENSE	744,000.	744,000.
REPAIRS	51,426.	51,426.
SALARIES AND WAGES	1,524,203.	1,524,203.
SPECIAL EVENTS EXPENSE	6,600.	6,600.
TRAVEL	91,714.	91,714.
TOTAL TO SCHEDULE M-3, PART II, LINE 25	6,926,497.	6,926,497.

IMMERSIVE ART SPACE, LP C/O WALDMAN HIRS

85-4007578

FORM 8916-A

OTHER ITEMS WITH NO DIFFERENCES

STATEMENT 15

DESCRIPTION	PER INCOME STATEMENT	PER TAX RETURN
CAFE COST	215,512.	215,512.
DALEWELL COST	0.	0.
FOOD COST	2,893.	2,893.
INTERCOMPANY COGS	0.	0.
INTERCOMPANY MANAGEMENT FEES COGS	1,001,000.	1,001,000.
INTERCOMPANY MERCH COGS	478,895.	478,895.
INTERCOMPANY ROYALTIES COGS	360,397.	360,397.
MERCHANDISE COST	77,006.	77,006.
OTHER COST	3,434.	3,434.
PACKAGE COSTS	0.	0.
TICKETS COST	550,051.	550,051.
TOTAL TO LINE 7	2,689,188.	2,689,188.

651121

**Schedule K-1
(Form 1065)**Department of the Treasury
Internal Revenue Service**2022**

For calendar year 2022, or tax year

☐ Final K-1☐ Amended K-1

OMB No. 1545-0123

Partner's Share of Income, Deductions, Credits, etc.

See separate instructions.

Part I Information About the Partnership**A** Partnership's employer identification number
85-4007578**B** Partnership's name, address, city, state, and ZIP code
IMMERSIVE ART SPACE, LP
C/O WALDMAN HIRSCH
3 SECOND STREET, SUITE 204
JERSEY CITY, NJ 07311**C** IRS center where partnership filed return:
E-FILE**D** ☐ Check if this is a publicly traded partnership (PTP)**Part II Information About the Partner****E** Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instructions.)
2401**F** Name, address, city, state, and ZIP code for partner entered in E. See instructions.

LIGHTHOUSE IMMERSIVE USA INC

G ☐ General partner or LLC member-manager☒ Limited partner or other LLC member**H1** ☒ Domestic partner☐ Foreign partner**H2** ☐ If the partner is a disregarded entity (DE), enter the partner's:

TIN _____ Name _____

I1 What type of entity is this partner? CORPORATION**I2** If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here ☐**J** Partner's share of profit, loss, and capital:

	Beginning	Ending
Profit	69.9000000 %	69.9000000 %
Loss	69.9000000 %	69.9000000 %
Capital	69.9000000 %	69.9000000 %

Check if decrease is due to sale or exchange of partnership interest ☐**K** Partner's share of liabilities:

	Beginning	Ending
Nonrecourse	\$	\$
Qualified nonrecourse financing	\$	\$
Recourse	\$ 4,904,452.	\$ 4,460,327.

Check this box if Item K includes liability amounts from lower-tier partnerships ☐**L Partner's Capital Account Analysis**

Beginning capital account	\$ 6,879,749.
Capital contributed during the year	\$
Current year net income (loss)	\$ -838,604.
Other increase (decrease) (attach explanation)	\$
Withdrawals and distributions	\$ ()
Ending capital account	\$ 6,041,145.

M Did the partner contribute property with a built-in gain (loss)?☐ Yes ☒ No If "Yes," attach statement. See instructions.**N Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss)**

Beginning	\$
Ending	\$

Part III Partner's Share of Current Year Income, Deductions, Credits, and Other Items

1 Ordinary business income (loss) - 838,604.	14 Self-employment earnings (loss)
2 Net rental real estate income (loss)	15 Credits
3 Other net rental income (loss)	
4a Guaranteed payments for services	16 Schedule K-3 is attached if checked <input type="checkbox"/>
4b Guaranteed payments for capital	17 Alternative min tax (AMT) items
4c Total guaranteed payments	
5 Interest income	18 Tax-exempt income and nondeductible expenses
6a Ordinary dividends	
6b Qualified dividends	19 Distributions
6c Dividend equivalents	
7 Royalties	20 Other information Z * STMT
8 Net short-term capital gain (loss)	AG * 7,814,321.
9a Net long-term capital gain (loss)	
9b Collectibles (28%) gain (loss)	
9c Unrecaptured section 1250 gain	
10 Net section 1231 gain (loss)	
11 Other income (loss)	
12 Section 179 deduction	21 Foreign taxes paid or accrued
13 Other deductions	
22 <input type="checkbox"/> More than one activity for at-risk purposes*	
23 <input type="checkbox"/> More than one activity for passive activity purposes*	

*See attached statement for additional information.

For IRS Use Only

IMMERSIVE ART SPACE, LP C/O WALDMAN HIRS

85-4007578

SCHEDULE K-1 SECTION 199A INFORMATION, BOX 20, CODE Z

DESCRIPTION	AMOUNT
TRADE OR BUSINESS -	
ORDINARY INCOME (LOSS)	-838,604.
W-2 WAGES	1,065,418.
UNADJUSTED BASIS OF ASSETS	545,607.

SCHEDULE K-1 SECTION 199A ADDITIONAL INFORMATION

THE SECTION 199A AMOUNTS TO BE USED IN THE CALCULATION OF QUALIFIED BUSINESS INCOME DEDUCTION ON YOUR 1040/1041 RETURN ARE REPORTED ON LINE 20, UNDER CODE Z. PLEASE CONSULT YOUR TAX ADVISOR REGARDING THE CALCULATION OF THE QUALIFIED BUSINESS INCOME DEDUCTION, INCLUDING THE POSSIBLE AGGREGATIONS AND LIMITATIONS THAT MAY APPLY AND THE FILING OF THE 1.199A-4(C)(2)(I) ANNUAL DISCLOSURE STATEMENT.

SCHEDULE K-1 GROSS RECEIPTS FOR SECTION 448(C), BOX 20, CODE AG

DESCRIPTION	PARTNER FILING INSTRUCTIONS	AMOUNT
GROSS RECEIPTS - CURRENT YEAR	SEE IRS SCH. K-1 INSTRUCTIONS	7,814,321.
TOTAL TO SCHEDULE K-1, LINE 20 AG		7,814,321.

IMMERSIVE ART SPACE, LP C/O WALDMAN HIRS85-4007578

SCHEDULE K-1	CURRENT YEAR NET INCOME (LOSS) AND OTHER INCREASES(DECREASES)
--------------	--

DESCRIPTION	AMOUNT	TOTALS
ORDINARY INCOME (LOSS)	-838,604.	
SCHEDULE K-1 INCOME SUBTOTAL		-838,604.
NET INCOME (LOSS) PER SCHEDULE K-1		-838,604.

SCHEDULE K-1	SCHEDULE K-3 NOTIFICATION
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THE SCHEDULE K-3 HAS NOT BEEN PREPARED FOR YOU. YOU WILL NOT RECEIVE A COPY OF THE SCHEDULE UNLESS YOU REQUEST ONE.

651121

**Schedule K-1
(Form 1065)**Department of the Treasury
Internal Revenue Service**2022**

For calendar year 2022, or tax year

☐ Final K-1☐ Amended K-1

OMB No. 1545-0123

**Partner's Share of Income, Deductions,
Credits, etc.**

See separate instructions.

**Part III Partner's Share of Current Year Income,
Deductions, Credits, and Other Items****Part I Information About the Partnership****A** Partnership's employer identification number
85-4007578**B** Partnership's name, address, city, state, and ZIP code
IMMERSIVE ART SPACE, LP
C/O WALDMAN HIRSCH
3 SECOND STREET, SUITE 204
JERSEY CITY, NJ 07311**C** IRS center where partnership filed return:
E-FILE**D** ☐ Check if this is a publicly traded partnership (PTP)**Part II Information About the Partner****E** Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instructions.)
6111**F** Name, address, city, state, and ZIP code for partner entered in E. See instructions.**MAESTRO IMMERSIVE ARTS INC.****G** ☐ General partner or LLC member-manager ☒ Limited partner or other LLC member**H1** ☒ Domestic partner ☐ Foreign partner**H2** ☐ If the partner is a disregarded entity (DE), enter the partner's:

TIN _____ Name _____

I1 What type of entity is this partner? **CORPORATION****I2** If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here ☐**J** Partner's share of profit, loss, and capital:

	Beginning	Ending
Profit	29.9000000 %	29.9000000 %
Loss	29.9000000 %	29.9000000 %
Capital	29.9000000 %	29.9000000 %

Check if decrease is due to sale or exchange of partnership interest ☐**K** Partner's share of liabilities:

	Beginning	Ending
Nonrecourse	\$	\$
Qualified nonrecourse financing	\$	\$
Recourse	\$ 2,097,899.	\$ 1,907,923.

Check this box if Item K includes liability amounts from lower-tier partnerships ☐**L Partner's Capital Account Analysis**

Beginning capital account	\$ 2,942,839.
Capital contributed during the year	\$
Current year net income (loss)	\$ -358,717.
Other increase (decrease) (attach explanation)	\$
Withdrawals and distributions	\$ ()
Ending capital account	\$ 2,584,122.

M Did the partner contribute property with a built-in gain (loss)?☐ Yes ☒ No If "Yes," attach statement. See instructions.**N Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss)**

Beginning	\$
Ending	\$

1 Ordinary business income (loss) - 358,717.	14 Self-employment earnings (loss)
2 Net rental real estate income (loss)	15 Credits
3 Other net rental income (loss)	
4a Guaranteed payments for services	16 Schedule K-3 is attached if checked <input type="checkbox"/>
4b Guaranteed payments for capital	17 Alternative min tax (AMT) items
4c Total guaranteed payments	
5 Interest income	18 Tax-exempt income and nondeductible expenses
6a Ordinary dividends	
6b Qualified dividends	19 Distributions
6c Dividend equivalents	
7 Royalties	20 Other information Z * STMT
8 Net short-term capital gain (loss)	AG * 3,342,606.
9a Net long-term capital gain (loss)	
9b Collectibles (28%) gain (loss)	
9c Unrecaptured section 1250 gain	
10 Net section 1231 gain (loss)	
11 Other income (loss)	
12 Section 179 deduction	21 Foreign taxes paid or accrued
13 Other deductions	
22 <input type="checkbox"/> More than one activity for at-risk purposes*	
23 <input type="checkbox"/> More than one activity for passive activity purposes*	

*See attached statement for additional information.

For IRS Use Only

IMMERSIVE ART SPACE, LP C/O WALDMAN HIRS

85-4007578

SCHEDULE K-1 SECTION 199A INFORMATION, BOX 20, CODE Z

DESCRIPTION	AMOUNT
TRADE OR BUSINESS -	
ORDINARY INCOME (LOSS)	-358,717.
W-2 WAGES	455,738.
UNADJUSTED BASIS OF ASSETS	233,385.

SCHEDULE K-1 SECTION 199A ADDITIONAL INFORMATION

THE SECTION 199A AMOUNTS TO BE USED IN THE CALCULATION OF QUALIFIED BUSINESS INCOME DEDUCTION ON YOUR 1040/1041 RETURN ARE REPORTED ON LINE 20, UNDER CODE Z. PLEASE CONSULT YOUR TAX ADVISOR REGARDING THE CALCULATION OF THE QUALIFIED BUSINESS INCOME DEDUCTION, INCLUDING THE POSSIBLE AGGREGATIONS AND LIMITATIONS THAT MAY APPLY AND THE FILING OF THE 1.199A-4(C)(2)(I) ANNUAL DISCLOSURE STATEMENT.

SCHEDULE K-1 GROSS RECEIPTS FOR SECTION 448(C), BOX 20, CODE AG

DESCRIPTION	PARTNER FILING INSTRUCTIONS	AMOUNT
GROSS RECEIPTS - CURRENT YEAR	SEE IRS SCH. K-1 INSTRUCTIONS	3,342,606.
TOTAL TO SCHEDULE K-1, LINE 20 AG		3,342,606.

IMMERSIVE ART SPACE, LP C/O WALDMAN HIRS

85-4007578

SCHEDULE K-1 CURRENT YEAR NET INCOME (LOSS) AND
OTHER INCREASES(DECREASES)

DESCRIPTION	AMOUNT	TOTALS
ORDINARY INCOME (LOSS)	-358,717.	
SCHEDULE K-1 INCOME SUBTOTAL		-358,717.
NET INCOME (LOSS) PER SCHEDULE K-1		-358,717.

SCHEDULE K-1 SCHEDULE K-3 NOTIFICATION

THE SCHEDULE K-3 HAS NOT BEEN PREPARED FOR YOU. YOU WILL NOT RECEIVE A COPY OF THE SCHEDULE UNLESS YOU REQUEST ONE.

651121

**Schedule K-1
(Form 1065)**Department of the Treasury
Internal Revenue Service**2022**

For calendar year 2022, or tax year

☐ Final K-1☐ Amended K-1

OMB No. 1545-0123

**Partner's Share of Income, Deductions,
Credits, etc.**

See separate instructions.

**Part III Partner's Share of Current Year Income,
Deductions, Credits, and Other Items****Part I Information About the Partnership****A** Partnership's employer identification number
85-4007578**B** Partnership's name, address, city, state, and ZIP code
IMMERSIVE ART SPACE, LP
C/O WALDMAN HIRSCH
3 SECOND STREET, SUITE 204
JERSEY CITY, NJ 07311**C** IRS center where partnership filed return:
E-FILE**D** ☐ Check if this is a publicly traded partnership (PTP)**Part II Information About the Partner****E** Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instructions.)
8079**F** Name, address, city, state, and ZIP code for partner entered in E. See instructions.

IMMERSIVE ARTS SPACE LLC

G ☒ General partner or LLC member-manager ☐ Limited partner or other LLC member**H1** ☒ Domestic partner ☐ Foreign partner**H2** ☐ If the partner is a disregarded entity (DE), enter the partner's:

TIN _____ Name _____

I1 What type of entity is this partner? **PARTNERSHIP****I2** If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here ☐**J** Partner's share of profit, loss, and capital:

	Beginning	Ending
Profit	0.2000000 %	0.2000000 %
Loss	0.2000000 %	0.2000000 %
Capital	0.2000000 %	0.2000000 %

Check if decrease is due to sale or exchange of partnership interest ☐**K** Partner's share of liabilities:

	Beginning	Ending
Nonrecourse	\$	\$
Qualified nonrecourse financing	\$	\$
Recourse	\$ 14,033.	\$ 12,762.

Check this box if Item K includes liability amounts from lower-tier partnerships ☐**L Partner's Capital Account Analysis**

Beginning capital account	\$ 19,684.
Capital contributed during the year	\$
Current year net income (loss)	\$ -2,399.
Other increase (decrease) (attach explanation)	\$
Withdrawals and distributions	\$ ()
Ending capital account	\$ 17,285.

M Did the partner contribute property with a built-in gain (loss)?
☐ Yes ☒ No If "Yes," attach statement. See instructions.**N Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss)**

Beginning	\$
Ending	\$

1 Ordinary business income (loss) -2,399.	14 Self-employment earnings (loss) A -2,399.
2 Net rental real estate income (loss)	C 17,408.
3 Other net rental income (loss)	15 Credits
4a Guaranteed payments for services	16 Schedule K-3 is attached if checked <input type="checkbox"/>
4b Guaranteed payments for capital	17 Alternative min tax (AMT) items
4c Total guaranteed payments	
5 Interest income	18 Tax-exempt income and nondeductible expenses
6a Ordinary dividends	
6b Qualified dividends	
6c Dividend equivalents	19 Distributions
7 Royalties	20 Other information Z * STMT
8 Net short-term capital gain (loss)	AG * 22,359.
9a Net long-term capital gain (loss)	
9b Collectibles (28%) gain (loss)	
9c Unrecaptured section 1250 gain	
10 Net section 1231 gain (loss)	
11 Other income (loss)	
12 Section 179 deduction	21 Foreign taxes paid or accrued
13 Other deductions	
22 <input type="checkbox"/> More than one activity for at-risk purposes*	
23 <input type="checkbox"/> More than one activity for passive activity purposes*	

*See attached statement for additional information.

For IRS Use Only

IMMERSIVE ART SPACE, LP C/O WALDMAN HIRS

85-4007578

SCHEDULE K-1 SECTION 199A INFORMATION, BOX 20, CODE Z

DESCRIPTION	AMOUNT
TRADE OR BUSINESS -	
ORDINARY INCOME (LOSS)	-2,399.
SELF-EMPLOYMENT EARNINGS (LOSS)	-2,399.
W-2 WAGES	3,048.
UNADJUSTED BASIS OF ASSETS	1,561.

SCHEDULE K-1 SECTION 199A ADDITIONAL INFORMATION

THE SECTION 199A AMOUNTS TO BE USED IN THE CALCULATION OF QUALIFIED BUSINESS INCOME DEDUCTION ON YOUR 1040/1041 RETURN ARE REPORTED ON LINE 20, UNDER CODE Z. PLEASE CONSULT YOUR TAX ADVISOR REGARDING THE CALCULATION OF THE QUALIFIED BUSINESS INCOME DEDUCTION, INCLUDING THE POSSIBLE AGGREGATIONS AND LIMITATIONS THAT MAY APPLY AND THE FILING OF THE 1.199A-4(C)(2)(I) ANNUAL DISCLOSURE STATEMENT.

SCHEDULE K-1 GROSS RECEIPTS FOR SECTION 448(C), BOX 20, CODE AG

DESCRIPTION	PARTNER FILING INSTRUCTIONS	AMOUNT
GROSS RECEIPTS - CURRENT YEAR	SEE IRS SCH. K-1 INSTRUCTIONS	22,359.
TOTAL TO SCHEDULE K-1, LINE 20 AG		22,359.

IMMERSIVE ART SPACE, LP C/O WALDMAN HIRS

85-4007578

SCHEDULE K-1 CURRENT YEAR NET INCOME (LOSS) AND
OTHER INCREASES(DECREASES)

DESCRIPTION	AMOUNT	TOTALS
ORDINARY INCOME (LOSS)	-2,399.	
SCHEDULE K-1 INCOME SUBTOTAL		-2,399.
NET INCOME (LOSS) PER SCHEDULE K-1		-2,399.

SCHEDULE K-1 SCHEDULE K-3 NOTIFICATION

THE SCHEDULE K-3 HAS NOT BEEN PREPARED FOR YOU. YOU WILL NOT RECEIVE A COPY OF THE SCHEDULE UNLESS YOU REQUEST ONE.

2023 TAX RETURN FILING INSTRUCTIONS

U.S. RETURN OF PARTNERSHIP INCOME

FOR THE YEAR ENDING

December 31, 2023

Prepared For:

IMMERSIVE ART SPACE, LP
c/o Waldman Hirsch
3 Second Street, Suite 204
Jersey City, NJ 07311

Prepared By:

WALDMAN HIRSCH AND CO LLP
Harborside 10, 3 2nd St, Suite 204
Jersey City, NJ 07311

To Be Signed and Dated By:

A general partner

Amount of Tax:

Not applicable

Mail Tax Return To:

This return has qualified for electronic filing. After reviewing your return for completeness and accuracy, please sign Form 8879-PE and contact our office to confirm that your return can be filed electronically.

Forms to be Distributed to Partners:

Enclosed are copies of Schedule K-1 to be distributed to the partners.

Return Must be Mailed On or Before:

Return federal Form 8879-PE to us by September 16, 2024.

Special Instructions:

Do not mail the paper copy of the return to the IRS.

***** THIS IS NOT A FILEABLE COPY *****

Form **8879-PE**Department of the Treasury
Internal Revenue Service**E-file Authorization for Form 1065**

(For return of partnership income or administrative adjustment request)

ERO must obtain and retain completed Form 8879-PE.
Go to www.irs.gov/Form8879PE for the latest information.

OMB No. 1545-0123

2023

For calendar year 2023, or tax year beginning

, 2023, ending

, 20

Name of partnership **IMMERSIVE ART SPACE, LP**
C/O WALDMAN HIRSCHEmployer identification number
85-4007578**Part I Form 1065 Information** (Whole dollars only)

1	Gross receipts or sales less returns and allowances (Form 1065, line 1c)	1	3,495,395.
2	Gross profit (Form 1065, line 3)	2	2,201,932.
3	Ordinary business income (loss) (Form 1065, line 23)	3	-1,762,073.
4	Net rental real estate income (loss) (Form 1065, Schedule K, line 2)	4	
5	Other net rental income (loss) (Form 1065, Schedule K, line 3c)	5	

Part II Declaration and Signature Authorization of Partner or Member or Partnership Representative

I declare under penalties of perjury that:

- 1a. If the Form 1065 is being transmitted as part of a return of partnership income, I am a partner or member of the named partnership.
- b. If the Form 1065 is being transmitted as part of an administrative adjustment request (AAR), I am the partnership representative (PR) of the named partnership.
2. I have examined a copy of the partnership's electronic Form 1065 (whether used as return or AAR) and accompanying forms, schedules, and statements, and to the best of my knowledge and belief, it/they is/are true, correct, and complete.
3. I am fully authorized to sign the return or AAR on behalf of the partnership.
4. The amounts shown in Part I above are the amounts shown on the electronic copy of the partnership's Form 1065.
5. I consent to allow my electronic return originator (ERO), transmitter, or intermediate service provider to transmit the partnership's return or AAR to the IRS and to receive from the IRS (a) an acknowledgment of receipt or reason for rejection of the transmission and (b) the reason for any delay in processing the return or AAR.
6. I have selected a personal identification number (PIN) as my signature for the partnership's electronic return of partnership income or AAR.

Partner's or Member or PR PIN: check one box only

☒ I authorize WALDMAN HIRSCH AND CO LLP to enter my PIN **Don't enter all zeros**
ERO firm name
as my signature on the partnership's 2023 electronically filed return of partnership income or AAR.

☐ As a Partner or Member or PR of the partnership, I will enter my PIN as my signature on the partnership's 2023 electronically filed return of partnership income or AAR..

Partner or Member or PR signature: _____ ****** THIS IS NOT A FILEABLE COPY ******
Title: PARTNER Date: _____

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.

 Don't enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2023 electronically filed return of partnership income or AAR for the partnership indicated above. I confirm that I am submitting this return or AAR in accordance with the requirements of **Pub. 3112**, IRS *e-file* Application and Participation, and **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS *e-file* Providers for Business Returns.

ERO's signature: WALDMAN HIRSCH AND CO LLP Date: 08/21/24

ERO Must Retain This Form - See Instructions
Don't Submit This Form to the IRS Unless Requested To Do So

For Paperwork Reduction Act Notice, see instructions.

Form **8879-PE** (2023)

Form **1065**Department of the Treasury
Internal Revenue Service**U.S. Return of Partnership Income**

OMB No. 1545-0123

For calendar year 2023, or tax year beginning _____, ending _____
Go to www.irs.gov/Form1065 for instructions and the latest information.**2023**

A Principal business activity CULTURAL EVENTS	Type or Print	Name of partnership IMMERSIVE ART SPACE, LP C/O WALDMAN HIRSCH	D Employer identification number 85-4007578
B Principal product or service THEATER		Number, street, and room or suite no. If a P.O. box, see instructions. 3 SECOND STREET, SUITE 204	E Date business started 11/17/2020
C Business code number 713900		City or town, state or province, country, and ZIP or foreign postal code JERSEY CITY NJ 07311	F Total assets (see instr.) \$ 7,090,910.

G Check applicable boxes: (1) ☐ Initial return (2) ☐ Final return (3) ☐ Name change (4) ☐ Address change (5) ☐ Amended return

H Check accounting method: (1) ☐ Cash (2) ☒ Accrual (3) ☐ Other (specify) _____

I Number of Schedules K-1. Attach one for each person who was a partner at any time during the tax year **3**

J Check if Schedules C and M-3 are attached ☐

K Check if partnership: (1) ☐ Aggregated activities for section 465 at-risk purposes (2) ☐ Grouped activities for section 469 passive activity purposes

Caution: Include **only** trade or business income and expenses on lines 1a through 23 below. See instructions for more information.

Income	1 a Gross receipts or sales	3,495,395.	b Less returns and allowances		c Balance	1c	3,495,395.
	2 Cost of goods sold (attach Form 1125-A)					2	1,293,463.
	3 Gross profit. Subtract line 2 from line 1c					3	2,201,932.
	4 Ordinary income (loss) from other partnerships, estates, and trusts (attach statement)					4	
	5 Net farm profit (loss) (attach Schedule F (Form 1040))					5	
	6 Net gain (loss) from Form 4797, Part II, line 17 (attach Form 4797)					6	
	7 Other income (loss) (attach statement)		SEE STATEMENT 2			7	45,289.
	8 Total income (loss). Combine lines 3 through 7					8	2,247,221.
Deductions (see instructions for limitations)	9 Salaries and wages (other than to partners) (less employment credits)					9	858,120.
	10 Guaranteed payments to partners					10	
	11 Repairs and maintenance					11	55,009.
	12 Bad debts					12	
	13 Rent					13	921,819.
	14 Taxes and licenses		SEE STATEMENT 3			14	208,870.
	15 Interest (see instructions)					15	1,218.
	16 a Depreciation (if required, attach Form 4562)	16a					
	b Less depreciation reported on Form 1125-A and elsewhere on return	16b				16c	
	17 Depletion (Do not deduct oil and gas depletion.)					17	
	18 Retirement plans, etc.					18	
	19 Employee benefit programs					19	59,761.
20 Energy efficient commercial buildings deduction (attach Form 7205)					20		
21 Other deductions (attach statement)		SEE STATEMENT 4			21	1,904,497.	
22 Total deductions. Add the amounts shown in the far right column for lines 9 through 21					22	4,009,294.	
23 Ordinary business income (loss). Subtract line 22 from line 8					23	-1,762,073.	
Tax and Payment	24 Interest due under the look-back method-completed long-term contracts (attach Form 8697)					24	
	25 Interest due under the look-back method-income forecast method (attach Form 8866)					25	
	26 BBA AAR imputed underpayment (see instructions)					26	
	27 Other taxes (see instructions)					27	
	28 Total balance due. Add lines 24 through 27					28	
	29 Elective payment election amount from Form 3800					29	
	30 Payment (see instructions)					30	
	31 Amount owed. If the sum of line 29 and line 30 is smaller than line 28, enter amount owed					31	
32 Overpayment. If the sum of line 29 and line 30 is larger than line 28, enter overpayment					32		

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than partner or limited liability company member) is based on all information of which preparer has any knowledge.			<div>May the IRS discuss this return with the preparer shown below? See instr. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>	
	Signature of partner or limited liability company member _____ Date _____				
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name		08/21/24		
	WALDMAN HIRSCH AND CO LLP				5694
	Firm's address	Firm's EIN			
	HARBORSIDE 10, 3 2ND ST, SUITE 204				
	JERSEY CITY, NJ 07311	Phone no. (212) 643-4422			

Form 1065 (2023)

IMMERSIVE ART SPACE, LP C/O WALDMAN HIRS

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Schedule B Other Information

1 What type of entity is filing this return? Check the applicable box:	Yes	No
a <input type="checkbox"/> Domestic general partnership		
b <input checked="" type="checkbox"/> Domestic limited partnership		
c <input type="checkbox"/> Domestic limited liability company		
d <input type="checkbox"/> Domestic limited liability partnership		
e <input type="checkbox"/> Foreign partnership		
f <input type="checkbox"/> Other		
2 At the end of the tax year:		
a Did any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, or tax-exempt organization, or any foreign government own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? For rules of constructive ownership, see instructions. If "Yes," attach Schedule B-1, Information on Partners Owning 50% or More of the Partnership	X	
b Did any individual or estate own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? For rules of constructive ownership, see instructions. If "Yes," attach Schedule B-1, Information on Partners Owning 50% or More of the Partnership		X
3 At the end of the tax year, did the partnership:		
a Own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of stock entitled to vote of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (iv) below		X
(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of Incorporation
b Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below		
(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity
4 Does the partnership satisfy all four of the following conditions?		
a The partnership's total receipts for the tax year were less than \$250,000.	Yes	No
b The partnership's total assets at the end of the tax year were less than \$ 1 million.		
c Schedules K-1 are filed with the return and furnished to the partners on or before the due date (including extensions) for the partnership return.		
d The partnership is not filing and is not required to file Schedule M-3 If "Yes," the partnership is not required to complete Schedules L, M-1, and M-2; item F on page 1 of Form 1065; or item L on Schedule K-1.		X
5 Is this partnership a publicly traded partnership, as defined in section 469(k)(2)?		
		X
6 During the tax year, did the partnership have any debt that was canceled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt?		
		X
7 Has this partnership filed, or is it required to file, Form 8918, Material Advisor Disclosure Statement, to provide information on any reportable transaction?		
		X
8 At any time during calendar year 2023, did the partnership have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country		
		X
9 At any time during the tax year, did the partnership receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," the partnership may have to file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts. See instructions		
		X
10 a Is the partnership making, or had it previously made (and not revoked), a section 754 election? If "Yes," enter the effective date of the election. See instructions for details regarding a section 754 election		
		X
b For this tax year, did the partnership make an optional basis adjustment under section 743(b)? If "Yes," enter the total aggregate net positive amount \$ and the total aggregate net negative amount \$ (.....) of such section 743(b) adjustments for all partners made in the tax year. The partnership must also attach a statement showing the computation and allocation of each basis adjustment. See instructions		
		X

Form 1065 (2023)

IMMERSIVE ART SPACE, LP C/O WALDMAN HIRS

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Schedule B Other Information (continued)		Yes	No
c	For this tax year, did the partnership make an optional basis adjustment under section 734(b)? If "Yes," enter the total aggregate net positive amount \$ _____ and the total aggregate net negative amount \$ (_____) of such section 734(b) adjustments for all partnership property made in the tax year. The partnership must also attach a statement showing the computation and allocation of each basis adjustment. See instructions		X
d	For this tax year, is the partnership required to adjust the basis of partnership property under section 743(b) or 734(b) because of a substantial built-in loss (as defined under section 743(d)) or substantial basis reduction (as defined under section 734(d))? If "Yes," enter the total aggregate amount of such section 743(b) adjustments and/or section 734(b) adjustments for all partners and/or partnership property made in the tax year \$ _____. The partnership must also attach a statement showing the computation and allocation of the basis adjustment. See instructions		X
11	Check this box if, during the current or prior tax year, the partnership distributed any property received in a like-kind exchange or contributed such property to another entity (other than disregarded entities wholly owned by the partnership throughout the tax year) <input type="checkbox"/>		
12	At any time during the tax year, did the partnership distribute to any partner a tenancy-in-common or other undivided interest in partnership property?		X
13	If the partnership is required to file Form 8858, Information Return of U.S. Persons With Respect to Foreign Disregarded Entities (FDEs) and Foreign Branches (FBs), enter the number of Forms 8858 attached. See instructions		
14	Does the partnership have any foreign partners? If "Yes," enter the number of Forms 8805, Foreign Partner's Information Statement of Section 1446 Withholding Tax, filed for this partnership		X
15	Enter the number of Forms 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships, attached to this return		
16 a	Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions		X
b	If "Yes," did you or will you file required Form(s) 1099?		
17	Enter the number of Forms 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations, attached to this return		
18	Enter the number of partners that are foreign governments under section 892		
19	During the partnership's tax year, did the partnership make any payments that would require it to file Form 1042 and 1042-S under chapter 3 (sections 1441 through 1464) or chapter 4 (sections 1471 through 1474)?		X
20	Was the partnership a specified domestic entity required to file Form 8938 for the tax year? See the Instructions for Form 8938		X
21	Is the partnership a section 721(c) partnership, as defined in Regulations section 1.721(c)-1(b)(14)?		X
22	During the tax year, did the partnership pay or accrue any interest or royalty for which one or more partners are not allowed a deduction under section 267A? See instructions		X
	If "Yes," enter the total amount of the disallowed deductions \$		
23	Did the partnership have an election under section 163(j) for any real property trade or business or any farming business in effect during the tax year? See instructions		X
24	Does the partnership satisfy one or more of the following? See instructions		X
a	The partnership owns a pass-through entity with current, or prior year carryover, excess business interest expense.		
b	The partnership's aggregate average annual gross receipts (determined under section 448(c)) for the 3 tax years preceding the current tax year are more than \$29 million and the partnership has business interest expense.		
c	The partnership is a tax shelter (see instructions) and the partnership has business interest expense. If "Yes" to any, complete and attach Form 8990.		
25	Is the partnership attaching Form 8996 to certify as a Qualified Opportunity Fund?		X
	If "Yes," enter the amount from Form 8996, line 15 \$		
26	Enter the number of foreign partners subject to section 864(c)(8) as a result of transferring all or a portion of an interest in the partnership or of receiving a distribution from the partnership Complete Schedule K-3 (Form 1065), Part XIII, for each foreign partner subject to section 864(c)(8) on a transfer or distribution.		
27	At any time during the tax year, were there any transfers between the partnership and its partners subject to the disclosure requirements of Regulations section 1.707-8?		X
28	Since December 22, 2017, did a foreign corporation directly or indirectly acquire substantially all of the properties constituting a trade or business of your partnership, and was the ownership percentage (by vote or value) for purposes of section 7874 greater than 50% (for example, the partners held more than 50% of the stock of the foreign corporation)? If "Yes," list the ownership percentage by vote and by value. See instructions.		
	Percentage: By vote By value		X
29	Is the partnership required to file Form 7208 relating to the excise tax on repurchase of corporate stock (see instructions):		
a	Under the applicable foreign corporation rules?		X

Form 1065 (2023)

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Schedule B Other Information <i>(continued)</i>		Yes	No
b	Under the covered surrogate foreign corporation rules? If "Yes" to either (a) or (b), complete Form 7208, Excise Tax on Repurchase of Corporate Stock. See the Instructions for Form 7208.		X
30	At any time during this tax year, did the partnership (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset (or financial interest in a digital asset)? See instructions		X
31	Is the partnership electing out of the centralized partnership audit regime under section 6221(b)? See instructions If "Yes," the partnership must complete Schedule B-2 (Form 1065). Enter the total from Schedule B-2, Part III, line 3 If "No," complete Designation of Partnership Representative below.		X

Designation of Partnership Representative (see instructions)

Enter below the information for the partnership representative (PR) for the tax year covered by this return.

Name of PR LIGHTHOUSE IMMERSIVE USA INC	
U.S. address of PR	U.S. phone number of PR
If the PR is an entity, name of the designated individual for the PR COREY ROSS	
U.S. address of designated individual	U.S. phone number of designated individual
C/O WALDMAN HIRSCH 3 2ND ST SUITE 2 JERSEY CITY, NJ 07311	

Form **1065** (2023)

Schedule K Partners' Distributive Share Items		Total amount	
Income (Loss)	1 Ordinary business income (loss) (page 1, line 23)	1	-1,762,073.
	2 Net rental real estate income (loss) (attach Form 8825)	2	
	3a Other gross rental income (loss)	3a	
	b Expenses from other rental activities (attach statement)	3b	
	c Other net rental income (loss). Subtract line 3b from line 3a	3c	
	4 Guaranteed payments: a Services 4a b Capital 4b	4c	
	c Total. Add lines 4a and 4b	4c	
	5 Interest income SEE STATEMENT 5	5	26,418.
	6 Dividends and dividend equivalents: a Ordinary dividends	6a	
	b Qualified dividends 6b c Dividend equivalents 6c		
	7 Royalties	7	
8 Net short-term capital gain (loss) (attach Schedule D (Form 1065))	8		
9a Net long-term capital gain (loss) (attach Schedule D (Form 1065))	9a		
b Collectibles (28%) gain (loss)	9b		
c Unrecaptured section 1250 gain (attach statement)	9c		
10 Net section 1231 gain (loss) (attach Form 4797)	10		
11 Other income (loss) (see instructions) Type:	11		
Deductions	12 Section 179 deduction (attach Form 4562)	12	
	13a Cash contributions	13a	
	b Noncash contributions	13b	
	c Investment interest expense	13c	
	d Section 59(e)(2) expenditures: (1) Type: (2) Amount	13d(2)	
e Other deductions (see instructions) Type:	13e		
Self-Employment	14a Net earnings (loss) from self-employment	14a	-3,524.
	b Gross farming or fishing income	14b	
	c Gross nonfarm income	14c	4,494.
Credits	15a Low-income housing credit (section 42(j)(5))	15a	
	b Low-income housing credit (other)	15b	
	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable)	15c	
	d Other rental real estate credits (see instructions) Type:	15d	
	e Other rental credits (see instructions) Type:	15e	
	f Other credits (see instructions) Type:	15f	
Inter-national	16 Attach Schedule K-2 (Form 1065), Partners' Distributive Share Items-International, and check this box to indicate that you are reporting items of international tax relevance <input type="checkbox"/>		
Alternative Minimum Tax (AMT) Items	17a Post-1986 depreciation adjustment	17a	
	b Adjusted gain or loss	17b	
	c Depletion (other than oil and gas)	17c	
	d Oil, gas, and geothermal properties - gross income	17d	
	e Oil, gas, and geothermal properties - deductions	17e	
	f Other AMT items (attach statement)	17f	
Other Information	18a Tax-exempt interest income	18a	
	b Other tax-exempt income	18b	
	c Nondeductible expenses SEE STATEMENT 6	18c	4,444.
	19a Distributions of cash and marketable securities	19a	4,453,333.
	b Distributions of other property	19b	
	20a Investment income	20a	26,418.
	b Investment expenses	20b	
	c Other items and amounts (attach statement) STMT 7		
21 Total foreign taxes paid or accrued	21		

Analysis of Net Income (Loss) per Return

1 Net income (loss). Combine Schedule K, lines 1 through 11. From the result, subtract the sum of Schedule K, lines 12 through 13e, and 21						1	-1,735,655.
2 Analysis by partner type:	(i) Corporate	(ii) Individual (active)	(iii) Individual (passive)	(iv) Partnership	(v) Exempt Organization	(vi) Nominee/Other	
a General partners				-3,471.			
b Limited partners	-1,732,184.						

Schedule L Balance Sheets per Books

Assets	Beginning of tax year		End of tax year	
	(a)	(b)	(c)	(d)
1 Cash		4,830,155.		438,166.
2a Trade notes and accounts receivable	2,354.		19,615.	
b Less allowance for bad debts		2,354.		19,615.
3 Inventories				
4 U.S. Government obligations				
5 Tax-exempt securities				
6 Other current assets (attach statement)	STATEMENT 8	10,220,900.		5,717,760.
7a Loans to partners (or persons related to partners)				
b Mortgage and real estate loans				
8 Other investments (attach statement)				
9a Buildings and other depreciable assets	740,482.		915,214.	
b Less accumulated depreciation		740,482.		915,214.
10a Depletable assets				
b Less accumulated depletion				
11 Land (net of any amortization)				
12a Intangible assets (amortizable only)				
b Less accumulated amortization				
13 Other assets (attach statement)	STATEMENT 9	0.		155.
14 Total assets		15,793,891.		7,090,910.
Liabilities and Capital				
15 Accounts payable		569,015.		1,133,954.
16 Mortgages, notes, bonds payable in less than 1 year				
17 Other current liabilities (attach statement)	STATEMENT 10	5,811,997.		2,563,033.
18 All nonrecourse loans				
19a Loans from partners (or persons related to partners)				
b Mortgages, notes, bonds payable in 1 year or more				
20 Other liabilities (attach statement)				
21 Partners' capital accounts		9,412,879.		3,393,923.
22 Total liabilities and capital		15,793,891.		7,090,910.

Schedule M-1 Reconciliation of Income (Loss) per Books With Analysis of Net Income (Loss) per Return

Note: The partnership may be required to file Schedule M-3. See instructions.

1 Net income (loss) per books		6 Income recorded on books this year not included on Schedule K, lines 1 through 11 (itemize):	
2 Income included on Schedule K, lines 1, 2, 3c, 5, 6a, 7, 8, 9a, 10, and 11, not recorded on books this year (itemize):		a Tax-exempt interest \$	
3 Guaranteed payments (other than health insurance)		7 Deductions included on Schedule K, lines 1 through 13e, and 21, not charged against book income this year (itemize):	
4 Expenses recorded on books this year not included on Schedule K, lines 1 through 13e, and 21 (itemize):		a Depreciation \$	
a Depreciation \$		8 Add lines 6 and 7	
b Travel and entertainment \$		9 Income (loss) (Analysis of Net Income (Loss), line 1). Subtract line 8 from line 5	
5 Add lines 1 through 4			

Schedule M-2 Analysis of Partners' Capital Accounts

1 Balance at beginning of year	8,642,552.	6 Distributions: a Cash	4,453,333.
2 Capital contributed: a Cash		b Property	
b Property		7 Other decreases (itemize):	
3 Net income (loss) (see instructions)	-1,735,655.	STMT 11	4,444.
4 Other increases (itemize):		8 Add lines 6 and 7	4,457,777.
5 Add lines 1 through 4	6,906,897.	9 Balance at end of year. Subtract line 8 from line 5	2,449,120.

Form **1125-A****Cost of Goods Sold**

(Rev. November 2018)

▶ **Attach to Form 1120, 1120-C, 1120-F, 1120S, or 1065.**

OMB No. 1545-0123

Department of the Treasury
Internal Revenue Service▶ **Go to www.irs.gov/Form1125A for the latest information.**Name **IMMERSIVE ART SPACE, LP**
C/O WALDMAN HIRSCH

Employer identification number

85-4007578

1	Inventory at beginning of year	1	
2	Purchases	2	
3	Cost of labor	3	
4	Additional section 263A costs (attach schedule)	4	
5	Other costs (attach schedule) SEE STATEMENT 12	5	1,293,463.
6	Total. Add lines 1 through 5	6	1,293,463.
7	Inventory at end of year	7	
8	Cost of goods sold. Subtract line 7 from line 6. Enter here and on Form 1120, page 1, line 2 or the appropriate line of your tax return. See instructions	8	1,293,463.

9 a Check all methods used for valuing closing inventory:

(i) ☐ Cost

(ii) ☐ Lower of cost or market

(iii) ☐ Other (Specify method used and attach explanation) ▶ _____

b Check if there was a writedown of subnormal goods ▶ ☐

c Check if the LIFO inventory method was adopted this tax year for any goods (if checked, attach Form 970) ▶ ☐

d If the LIFO inventory method was used for this tax year, enter amount of closing inventory computed under LIFO **9d** | _____

e If property is produced or acquired for resale, do the rules of Section 263A apply to the entity? See instructions ☐ Yes ☒ No

f Was there any change in determining quantities, cost, or valuations between opening and closing inventory? ☐ Yes ☒ No

If "Yes," attach explanation.

For Paperwork Reduction Act Notice, see separate instructions.

Form 1125-A (Rev. 11-2018)

**SCHEDULE B-1
(Form 1065)**(Rev. August 2019)
Department of the Treasury
Internal Revenue Service**Information on Partners Owning 50% or
More of the Partnership**

▶ Attach to Form 1065.

▶ Go to www.irs.gov/Form1065 for the latest information.

OMB No. 1545-0123

Name of partnership

Employer identification number

**IMMERSIVE ART SPACE, LP
C/O WALDMAN HIRSCH****85-4007578****Part I Entities Owning 50% or More of the Partnership** (Form 1065, Schedule B, Question 2a (Question 3a for 2009 through 2017))

Complete columns (i) through (v) below for any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, tax-exempt organization, or any foreign government that owns, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership (see instructions).

(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Maximum Percentage Owned in Profit, Loss, or Capital
LIGHTHOUSE IMMERSIVE USA INC	2401	CORPORATION	UNITED STATES	69.90

Part II Individuals or Estates Owning 50% or More of the Partnership (Form 1065, Schedule B, Question 2b (Question 3b for 2009 through 2017))

Complete columns (i) through (iv) below for any individual or estate that owns, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership (see instructions).

(i) Name of Individual or Estate	(ii) Identifying Number (if any)	(iii) Country of Citizenship (see instructions)	(iv) Maximum Percentage Owned in Profit, Loss, or Capital

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 1065.

Schedule B-1 (Form 1065) (Rev. 8-2019)

SCHEDULE M-3

(Form 1065)

(Rev. December 2021)
Department of the Treasury
Internal Revenue Service**Net Income (Loss) Reconciliation
for Certain Partnerships**

▶ Attach to Form 1065.

▶ Go to www.irs.gov/Form1065 for instructions and the latest information.

OMB No. 1545-0123

Name of partnership

**IMMERSIVE ART SPACE, LP
C/O WALDMAN HIRSCH**

Employer identification number

85-4007578**This Schedule M-3 is being filed because (check all that apply):**

- A** ☐ The amount of the partnership's total assets at the end of the tax year is equal to \$10 million or more.
- B** ☒ The amount of the partnership's adjusted total assets for the tax year is equal to \$10 million or more. If box B is checked, enter the amount of adjusted total assets for the tax year **13,284,342.**
- C** ☐ The amount of total receipts for the tax year is equal to \$35 million or more. If box C is checked, enter the total receipts for the tax year _____.
- D** ☐ An entity that is a reportable entity partner with respect to the partnership owns or is deemed to own an interest of 50% or more in the partnership's capital, profit, or loss on any day during the tax year of the partnership.

Name of Reportable Entity Partner	Identifying Number	Maximum Percentage Owned or Deemed Owned

E ☐ Voluntary filer.**Part I Financial Information and Net Income (Loss) Reconciliation****1a** Did the partnership file SEC Form 10-K for its income statement period ending with or within this tax year?

- ☐ **Yes.** Skip lines 1b and 1c and complete lines 2 through 11 with respect to that SEC Form 10-K.
- ☒ **No.** Go to line 1b. See instructions if multiple non-tax-basis income statements are prepared.

b Did the partnership prepare a certified audited non-tax-basis income statement for that period?

- ☐ **Yes.** Skip line 1c and complete lines 2 through 11 with respect to that income statement.
- ☒ **No.** Go to line 1c.

c Did the partnership prepare a non-tax-basis income statement for that period?

- ☒ **Yes.** Complete lines 2 through 11 with respect to that income statement.
- ☐ **No.** Skip lines 2 through 3b and enter the partnership's net income (loss) per its books and records on line 4a.

2 Enter the income statement period: Beginning **01/01/2023** Ending **12/31/2023****3a** Has the partnership's income statement been restated for the income statement period on line 2?

- ☐ **Yes.** (If "Yes," attach a statement and the amount of each item restated.)
- ☒ **No.**

b Has the partnership's income statement been restated for any of the 5 income statement periods immediately preceding the period on line 2?

- ☐ **Yes.** (If "Yes," attach a statement and the amount of each item restated.)
- ☒ **No.**

4a Worldwide consolidated net income (loss) from income statement source identified on Part I, line 1	4a	-1,565,438.
b Indicate accounting standard used for line 4a. See instructions.		
1 <input checked="" type="checkbox"/> GAAP 2 <input type="checkbox"/> IFRS 3 <input type="checkbox"/> Section 704(b)		
4 <input type="checkbox"/> Tax-basis 5 <input type="checkbox"/> Other (specify) ▶		
5a Net income from nonincludible foreign entities (attach statement)	5a	()
b Net loss from nonincludible foreign entities (attach statement and enter as a positive amount)	5b	
6a Net income from nonincludible U.S. entities (attach statement)	6a	()
b Net loss from nonincludible U.S. entities (attach statement and enter as a positive amount)	6b	
7a Net income (loss) of other foreign disregarded entities (attach statement)	7a	
b Net income (loss) of other U.S. disregarded entities (attach statement)	7b	
8 Adjustment to eliminations of transactions between includible entities and nonincludible entities (attach stmt.)	8	
9 Adjustment to reconcile income statement period to tax year (attach statement)	9	
10 Other adjustments to reconcile to amount on line 11 (attach statement)	10	
11 Net income (loss) per income statement of the partnership. Combine lines 4a through 10	11	-1,565,438.

Note: Part I, line 11, must equal Part II, line 26, column (a); or Form 1065, Schedule M-1, line 1. See instructions.**12** Enter the total amount (not just the partnership's share) of the assets and liabilities of all entities included or removed on the following lines.

	Total Assets	Total Liabilities
a Included on Part I, line 4	7,090,910.	3,696,987.
b Removed on Part I, line 5		
c Removed on Part I, line 6		
d Included on Part I, line 7		

For Paperwork Reduction Act Notice, see the instructions for your return.**Schedule M-3 (Form 1065) (Rev. 12-2021)**

Name of partnership **IMMERSIVE ART SPACE, LP**
C/O WALDMAN HIRSCH

Employer identification number
85-4007578

Part II Reconciliation of Net Income (Loss) per Income Statement of Partnership With Income (Loss) per Return

Income (Loss) Items	(a) Income (Loss) per Income Statement	(b) Temporary Difference	(c) Permanent Difference	(d) Income (Loss) per Tax Return
Attach statements for lines 1 through 10.				
1 Income (loss) from equity method foreign corporations				
2 Gross foreign dividends not previously taxed				
3 Subpart F, QEF, and similar income inclusions				
4 Gross foreign distributions previously taxed				
5 Income (loss) from equity method U.S. corporations				
6 U.S. dividends				
7 Income (loss) from U.S. partnerships				
8 Income (loss) from foreign partnerships				
9 Income (loss) from other pass- through entities				
10 Items relating to reportable transactions				
11 Interest income (see instructions)	26,418.			26,418.
12 Total accrual to cash adjustment				
13 Hedging transactions				
14 Mark-to-market income (loss)				
15 Cost of goods sold (see instructions)	(1,293,463.)			(1,293,463.)
16 Sale versus lease (for sellers and/or lessors)				
17 Section 481(a) adjustments				
18 Unearned/deferred revenue				
19 Income recognition from long-term contracts				
20 Original issue discount and other imputed interest				
21a Income statement gain/loss on sale, exchange, abandonment, worthlessness, or other disposition of assets other than inventory and pass-through entities				
b Gross capital gains from Schedule D, excluding amounts from pass-through entities				
c Gross capital losses from Schedule D, excluding amounts from pass-through entities, abandonment losses, and worthless stock losses				
d Net gain/loss reported on Form 4797, line 17, excluding amounts from pass-through entities, abandonment losses, and worthless stock losses ...				
e Abandonment losses				
f Worthless stock losses (attach statement)				
g Other gain/loss on disposition of assets other than inventory Other income (loss) items with differences (attach statement)				
22				
23 Total income (loss) items. Combine lines 1 through 22	-1,267,045.			-1,267,045.
24 Total expense/deduction items. (From Part III, line 31) (see instructions)	-143,981.	-174,661.	4,444.	-314,198.
25 Other items with no differences STMT 13	-154,412.			-154,412.
26 Reconciliation totals. Combine lines 23 through 25	-1,565,438.	-174,661.	4,444.	-1,735,655.

Note: Line 26, column (a), must equal Part I, line 11, and column (d) must equal Form 1065, Analysis of Net Income (Loss), line 1.

Name of partnership **IMMERSIVE ART SPACE, LP**
C/O WALDMAN HIRSCH

Employer identification number
85-4007578

Part III Reconciliation of Net Income (Loss) per Income Statement of Partnership With Income (Loss) per Return - Expense/Deduction Items

Expense/Deduction Items	(a) Expense per Income Statement	(b) Temporary Difference	(c) Permanent Difference	(d) Deduction per Tax Return
1 State and local current income tax expense				
2 State and local deferred income tax expense				
3 Foreign current income tax expense (other than foreign withholding taxes)				
4 Foreign deferred income tax expense				
5 Equity-based compensation				
6 Meals and entertainment STMT 15	8,888.		-4,444.	4,444.
7 Fines and penalties				
8 Judgments, damages, awards, and similar costs				
9 Guaranteed payments				
10 Pension and profit-sharing				
11 Other post-retirement benefits				
12 Deferred compensation				
13 Charitable contribution of cash and tangible property				
14 Charitable contribution of intangible property				
15 Organizational expenses as per Regulations section 1.709-2(a)				
16 Syndication expenses as per Regulations section 1.709-2(b) ..				
17 Current year acquisition/reorganization investment banking fees				
18 Current year acquisition/reorganization legal and accounting fees				
19 Amortization/impairment of goodwill				
20 Amortization of acquisition, reorganization, and start-up costs				
21 Other amortization or impairment write-offs				
22 Reserved for future use				
23a Depletion - oil & gas				
b Depletion - other than oil & gas				
24 Intangible drilling and development costs (IDC)				
25 Depreciation				
26 Bad debt expense				
27 Interest expense (see instructions)	1,218.			1,218.
28 Purchase versus lease (for purchasers and/or lessees)				
29 Research and development costs				
30 Other expense/deduction items with differences (attach statement) STMT 16	133,875.	174,661.		308,536.
31 Total expense/deduction items. Combine lines 1 through 30. Enter here and on Part II, line 24, reporting positive amounts as negative and negative amounts as positive	143,981.	174,661.	-4,444.	314,198.

Schedule M-3 (Form 1065) (Rev. 12-2021)

Form **8916-A**
(Rev. November 2019)
Department of the Treasury
Internal Revenue Service

Supplemental Attachment to Schedule M-3

OMB No. 1545-0123

► Attach to Schedule M-3 for Form 1065, 1120, 1120-L, 1120-PC, or 1120-S.
► Go to www.irs.gov/Form1120 for the latest information.

Name of common parent IMMERSIVE ART SPACE, LP C/O WALDMAN HIRS	Employer identification number 85-4007578
Name of subsidiary	Employer identification number

Part I Cost of Goods Sold

Cost of Goods Sold Items	(a) Expense per Income Statement	(b) Temporary Difference	(c) Permanent Difference	(d) Deduction per Tax Return
1 Amounts attributable to cost flow assumptions				
2 Amounts attributable to:				
a Stock option expense				
b Other equity-based compensation				
c Meals and entertainment				
d Parachute payments				
e Compensation with section 162(m) limitation				
f Pension and profit sharing				
g Other post-retirement benefits				
h Deferred compensation				
i Reserved				
j Amortization				
k Depletion				
l Depreciation				
m Corporate-owned life insurance premiums ...				
n Other section 263A costs				
3 Inventory shrinkage accruals				
4 Excess inventory and obsolescence reserves				
5 Lower of cost or market write-downs				
6 Other items with differences (attach statement) SEE STATEMENT 18				
7 Other items with no differences	1,293,463.			1,293,463.
8 Total cost of goods sold. Add lines 1 through 7 in columns a, b, c, and d. Enter totals on the applicable Schedule M-3. See instructions ...	1,293,463.			1,293,463.

LHA For Paperwork Reduction Act Notice, see instructions.

Form **8916-A** (Rev. 11-2019)

Part II Interest Income

	Interest Income Item	(a) Income (Loss) per Income Statement	(b) Temporary Difference	(c) Permanent Difference	(d) Income (Loss) per Tax Return
1	Tax-exempt interest income				
2	Interest income from hybrid securities				
3	Sale/lease interest income				
4a	Intercompany interest income - From outside tax affiliated group				
4b	Intercompany interest income - From tax affiliated group				
5	Other interest income STMT 19	26,418.			26,418.
6	Total interest income. Add lines 1 through 5 in columns a, b, c, and d. Enter total on the applicable Schedule M-3. See instructions.	26,418.			26,418.

Part III Interest Expense

	Interest Expense Item	(a) Expense per Income Statement	(b) Temporary Difference	(c) Permanent Difference	(d) Deduction per Tax Return
1	Interest expense from hybrid securities				
2	Lease/purchase interest expense				
3a	Intercompany interest expense - Paid to outside tax affiliated group				
3b	Intercompany interest expense - Paid to tax affiliated group				
4	Other interest expense STMT 20	1,218.			1,218.
5	Total interest expense. Add lines 1 through 4 in columns a, b, c, and d. Enter total on the applicable Schedule M-3. See instructions.	1,218.			1,218.

Form **8990**
(Rev. December 2022)
Department of the Treasury
Internal Revenue Service

Limitation on Business Interest Expense Under Section 163(j)

OMB No. 1545-0123

Attach to your tax return.

Go to www.irs.gov/Form8990 for instructions and the latest information.

Taxpayer name(s) shown on tax return IMMERSIVE ART SPACE, LP C/O WALDMAN HIRS	Identification number 85-4007578
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A If Form 8990 relates to an information return for a foreign entity (for example, Form 5471), enter:

Name of foreign entity _____

Employer identification number, if any _____

Reference ID number _____

B Is the foreign entity a CFC group member? See instructions ☐ Yes ☐ NoC Is this Form 8990 filed by the specified group parent for an entire CFC group? See instructions ☐ Yes ☐ NoD Has a CFC or a CFC group made a safe harbor election? If yes, see instructions for which lines of Form 8990 to complete ☐ Yes ☐ No

Part I Computation of Allowable Business Interest Expense

Part I is completed by all taxpayers subject to section 163(j). Schedule A and Schedule B need to be completed before Part I when the taxpayer is a partner or shareholder of a pass-through entity subject to section 163(j).

Section I - Business Interest Expense

1	Current year business interest expense (not including floor plan financing interest expense), before the section 163(j) limitation	1	1,218.	
2	Disallowed business interest expense carryforwards from prior years. (Does not apply to a partnership)	2		
3	Partner's excess business interest expense treated as paid or accrued in current year (Schedule A, line 44, column (h))	3		
4	Floor plan financing interest expense. See instructions	4		
5	Total business interest expense. Add lines 1 through 4	5		1,218.

Section II - Adjusted Taxable Income

Tentative Taxable Income

6	Tentative taxable income. See instructions	6	-1,735,655.
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Additions (adjustments to be made if amounts are taken into account on line 6)

7	Any item of loss or deduction that is not properly allocable to a trade or business of the taxpayer. See instructions	7		
8	Any business interest expense not from a pass-through entity. See instr.	8	1,218.	
9	Amount of any net operating loss deduction under section 172	9		
10	Amount of any qualified business income deduction allowed under section 199A	10		
11	Reserved for future use	11		
12	Amount of any loss or deduction items from a pass-through entity. See instructions	12		
13	Other additions. See instructions	13		
14	Total current year partner's excess taxable income (Schedule A, line 44, column (f))	14		
15	Total current year S corporation shareholder's excess taxable income (Schedule B, line 46, column (c))	15		
16	Total. Add lines 7 through 15	16		1,218.

Reductions (adjustments to be made if amounts are taken into account on line 6)

17	Any item of income or gain that is not properly allocable to a trade or business of the taxpayer. See instructions	17	()	
18	Any business interest income not from a pass-through entity. See instructions	18	()	
19	Amount of any income or gain items from a pass-through entity. See instructions	19	()	
20	Other reductions. See instructions	20	()	
21	Total. Combine lines 17 through 20	21	()	
22	Adjusted taxable income. Combine lines 6, 16, and 21. See instructions	22		

Section III - Business Interest Income

23	Current year business interest income. See instructions	23	26,418.		
24	Excess business interest income from pass-through entities (total of Schedule A, line 44, column (g), and Schedule B, line 46, column (d))	24			
25	Total. Add lines 23 and 24	25		26,418.	

Section IV - Section 163(j) Limitation Calculations**Limitation on Business Interest Expense**

26	Multiply the adjusted taxable income from line 22 by the applicable percentage. See instructions	26			
27	Business interest income (line 25)	27	26,418.		
28	Floor plan financing interest expense (line 4)	28			
29	Total. Add lines 26, 27, and 28	29		26,418.	

Allowable Business Interest Expense

30	Total current year business interest expense deduction. See instructions	30		1,218.	
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Carryforward

31	Disallowed business interest expense. Subtract line 29 from line 5. (If zero or less, enter -0-.)	31			
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Part II Partnership Pass-Through Items

Part II is only completed by a partnership that is subject to section 163(j). The partnership items below are allocated to the partners and are not carried forward by the partnership. See the instructions for more information.

Excess Business Interest Expense

32	Excess business interest expense. Enter amount from line 31	32			
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Excess Taxable Income (If you entered an amount on line 32, skip lines 33 through 37.)

33	Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0-.)	33			
34	Subtract line 33 from line 26. (If zero or less, enter -0-.)	34			
35	Divide line 34 by line 26. Enter the result as a decimal. (If line 26 is zero, enter -0-.)	35			
36	Excess taxable income. Multiply line 35 by line 22	36			

Excess Business Interest Income

37	Excess business interest income. Subtract the sum of lines 1, 2, and 3 from line 25. (If zero or less, enter -0-.)	37		25,200.	
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Part III S Corporation Pass-Through Items

Part III is only completed by S corporations that are subject to section 163(j). The S corporation items below are allocated to the shareholders. See the instructions for more information.

Excess Taxable Income

38	Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0-.)	38			
39	Subtract line 38 from line 26. (If zero or less, enter -0-.)	39			
40	Divide line 39 by line 26. Enter the result as a decimal. (If line 26 is zero, enter -0-.)	40			
41	Excess taxable income. Multiply line 40 by line 22	41			

Excess Business Interest Income

42	Excess business interest income. Subtract the sum of lines 1, 2, and 3 from line 25. (If zero or less, enter -0-.)	42			
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IMMERSIVE ART SPACE, LP C/O WALDMAN HIRS

85-4007578

FOOTNOTES

STATEMENT 1

ELECTION STATEMENT ACCORDING TO SEC. 1.181-2(C)(2)(I)

THE NAME OF THE PRODUCTION: IMMERSIVE ART SPACE LP

THE DATE AGGREGATE PRODUCTION COSTS WERE FIRST PAID OR
INCURRED FOR THE PRODUCTION: 03/16/2023THE AMOUNT OF AGGREGATE PRODUCTION COSTS PAID OR INCURRED
FOR THE PRODUCTION DURING THE TAXABLE YEAR: 283,171.THE AMOUNT OF QUALIFIED COMPENSATION (AS DEFINED IN SEC.
1.181-3(D)) PAID OR INCURRED FOR THE PRODUCTION DURING THE
TAXABLE YEAR: 8,950.THE AMOUNT OF COMPENSATION (AS DEFINED IN SEC. 1.181-3(C))
PAID OR INCURRED FOR THE PRODUCTION DURING THE TAXABLE YEAR: 0.THE OWNER REASONABLY EXPECTS (BASED ON ALL OF THE FACTS AND
CIRCUMSTANCES AT THE TIME THE ELECTION IS MADE) BOTH THAT
THE PRODUCTION WILL BE SET FOR PRODUCTION (OR HAS BEEN SET
FOR PRODUCTION) AND WILL BE A QUALIFIED FILM OR TELEVISION
PRODUCTION.

FORM 1065

OTHER INCOME

STATEMENT 2

DESCRIPTION

AMOUNT

PARKING REVENUE	22,659.
SPONSORSHIP INCOME	19,615.
VENDOR RELATED REFERRAL INCOME	3,015.
TOTAL TO FORM 1065, LINE 7	45,289.

FORM 1065

TAX EXPENSE

STATEMENT 3

DESCRIPTION

AMOUNT

LICENSE AND PERMITS	168.
PAYROLL TAXES	76,164.
SALES/USE TAX EXPENSE	132,538.
TOTAL TO FORM 1065, LINE 14	208,870.

IMMERSIVE ART SPACE, LP C/O WALDMAN HIRS

85-4007578

FORM 1065

OTHER DEDUCTIONS

STATEMENT 4

DESCRIPTION	AMOUNT
ADMINISTRATIVE EXPENSE	41,482.
ADVERTISING	794,016.
EXCHANGE LOSS	21,080.
INSURANCE	12.
MANAGEMENT FEES	214,500.
MEALS	4,444.
MISCELLANEOUS EXPENSE	90.
OCCUPANCY COSTS	165,079.
OPERATING EXPENSES	134,549.
PAYROLL EXPENSES	27,088.
PRODUCTION EXPENSES	308,536.
PROFESSIONAL FEE	147,961.
ROYALTIES EXPENSE	31,090.
TRAVEL	14,570.
TOTAL TO FORM 1065, LINE 21	1,904,497.

SCHEDULE K

INTEREST INCOME

STATEMENT 5

DESCRIPTION	U.S. BONDS	OTHER
INTEREST INCOME		26,418.
TOTAL TO SCHEDULE K, LINE 5		26,418.

SCHEDULE K

NONDEDUCTIBLE EXPENSE

STATEMENT 6

DESCRIPTION	AMOUNT
EXCLUDED MEALS AND ENTERTAINMENT EXPENSES	4,444.
TOTAL TO SCHEDULE K, LINE 18C	4,444.

IMMERSIVE ART SPACE, LP C/O WALDMAN HIRS

85-4007578

SCHEDULE K	OTHER ITEMS	STATEMENT 7
DESCRIPTION		AMOUNT
EXCESS BUSINESS INTEREST INCOME		25,200.
AGGREGATE BUSINESS ACTIVITY GROSS INCOME OR GAIN		2,247,221.
AGGREGATE BUSINESS ACTIVITY DEDUCTIONS		4,009,294.
SECTION 199A - ORDINARY INCOME (LOSS)		-1,762,073.
SECTION 199A W-2 WAGES		858,120.
SECTION 199A UNADJUSTED BASIS OF ASSETS		780,553.
BUSINESS INTEREST EXPENSE		1,218.

SCHEDULE L	OTHER CURRENT ASSETS	STATEMENT 8
DESCRIPTION	BEGINNING OF TAX YEAR	END OF TAX YEAR
DUE FROM INTERCOMPANY	10,219,569.	5,716,429.
EMPLOYEE ADVANCES	1,331.	1,331.
TOTAL TO SCHEDULE L, LINE 6	10,220,900.	5,717,760.

SCHEDULE L	OTHER ASSETS	STATEMENT 9
DESCRIPTION	BEGINNING OF TAX YEAR	END OF TAX YEAR
DESIGN	0.	155.
TOTAL TO SCHEDULE L, LINE 13	0.	155.

IMMERSIVE ART SPACE, LP C/O WALDMAN HIRS

85-4007578

SCHEDULE L	OTHER CURRENT LIABILITIES	STATEMENT 10
DESCRIPTION	BEGINNING OF TAX YEAR	END OF TAX YEAR
DUE TO INTERCOMPANY	5,464,254.	2,232,005.
MEDICAL AND DENTAL LIABILITY	41,750.	62,903.
SALES TAX PAYABLE	9,501.	90,322.
TIPS PAYABLE	94,392.	116,422.
UNEARNED REVENUE - TICKET SALES	202,100.	61,381.
TOTAL TO SCHEDULE L, LINE 17	5,811,997.	2,563,033.

SCHEDULE M-2	OTHER DECREASES	STATEMENT 11
DESCRIPTION		AMOUNT
NONDEDUCTIBLE EXPENSES		4,444.
TOTAL TO SCHEDULE M-2, LINE 7		4,444.

FORM 1125-A	OTHER COSTS	STATEMENT 12
DESCRIPTION		AMOUNT
CAFE COST		89,623.
INTERCOMPANY MANAGEMENT FEES COGS		546,000.
INTERCOMPANY MERCH COGS		42,551.
INTERCOMPANY ROYALTIES COGS		42,500.
MERCHANDISE COST		27,481.
TICKETS COST		545,308.
TOTAL TO LINE 5		1,293,463.

IMMERSIVE ART SPACE, LP C/O WALDMAN HIRS

85-4007578

SCHEDULE M-3 OTHER INCOME (LOSS) AND EXPENSE / DEDUCTION STATEMENT 13
ITEMS WITH NO DIFFERENCES

DESCRIPTION	PER INCOME STATEMENT	PER TAX RETURN
OTHER INCOME (LOSS) - SEE STATEMENT	3,540,684.	3,540,684.
OTHER EXPENSE / DEDUCTION - SEE STATEMENT	-3,695,096.	-3,695,096.
TOTAL TO SCHEDULE M-3, PART II, LINE 25	-154,412.	-154,412.

SCHEDULE M-3 OTHER INCOME (LOSS) ITEMS WITH NO DIFFERENCES STATEMENT 14

DESCRIPTION	INCOME (LOSS) PER INCOME STATEMENT	INCOME (LOSS) PER TAX RETURN
PARKING REVENUE	22,659.	22,659.
SALES	3,495,395.	3,495,395.
SPONSORSHIP INCOME	19,615.	19,615.
VENDOR RELATED REFERRAL INCOME	3,015.	3,015.
TOTAL TO SCHEDULE M-3, PART II, LINE 25	3,540,684.	3,540,684.

SCHEDULE M-3 MEALS AND ENTERTAINMENT STATEMENT 15

DESCRIPTION	EXPENSE PER INCOME STATEMENT	TEMPORARY DIFFERENCE	PERMANENT DIFFERENCE	DEDUCTION PER TAX RETURN
MEALS AND ENTERTAINMENT FROM TRADE OR BUSINESS	8,888.		-4,444.	4,444.
TOTAL	8,888.		-4,444.	4,444.

IMMERSIVE ART SPACE, LP C/O WALDMAN HIRS

85-4007578

SCHEDULE M-3 OTHER EXPENSE/DEDUCTION ITEMS WITH DIFFERENCES STATEMENT 16

DESCRIPTION	EXPENSE/ DEDUCTION PER INCOME STATEMENT	TEMPORARY DIFFERENCE	PERMANENT DIFFERENCE	EXPENSE/ DEDUCTION PER TAX RETURN
PRODUCTION EXPENSES	133,875.	174,661.	0.	308,536.
TOTAL TO M-3, PART III, LINE 30	133,875.	174,661.	0.	308,536.

SCHEDULE M-3 OTHER EXPENSE/DEDUCTION ITEMS STATEMENT 17
WITH NO DIFFERENCES

DESCRIPTION	EXPENSE/ DEDUCTION PER INCOME STATEMENT	EXPENSE/ DEDUCTION PER TAX RETURN
ADMINISTRATIVE EXPENSE	41,482.	41,482.
ADVERTISING	794,016.	794,016.
EMPLOYEE BENEFIT PROGRAMS	59,761.	59,761.
EXCHANGE LOSS	21,080.	21,080.
INSURANCE	12.	12.
LICENSE AND PERMITS	168.	168.
MANAGEMENT FEES	214,500.	214,500.
MISCELLANEOUS EXPENSE	90.	90.
OCCUPANCY COSTS	165,079.	165,079.
OPERATING EXPENSES	134,549.	134,549.
PAYROLL EXPENSES	27,088.	27,088.
PAYROLL TAXES	76,164.	76,164.
PROFESSIONAL FEE	147,961.	147,961.
RENT EXPENSE	921,819.	921,819.
REPAIRS	55,009.	55,009.
ROYALTIES EXPENSE	31,090.	31,090.
SALARIES AND WAGES	858,120.	858,120.
SALES/USE TAX EXPENSE	132,538.	132,538.
TRAVEL	14,570.	14,570.
TOTAL TO SCHEDULE M-3, PART II, LINE 25	3,695,096.	3,695,096.

IMMERSIVE ART SPACE, LP C/O WALDMAN HIRS

85-4007578

FORM 8916-A

OTHER ITEMS WITH NO DIFFERENCES

STATEMENT 18

DESCRIPTION	PER INCOME STATEMENT	PER TAX RETURN
	0.	0.
CAFE COST	89,623.	89,623.
INTERCOMPANY MANAGEMENT FEES COGS	546,000.	546,000.
INTERCOMPANY MERCH COGS	42,551.	42,551.
INTERCOMPANY ROYALTIES COGS	42,500.	42,500.
MERCHANDISE COST	27,481.	27,481.
TICKETS COST	545,308.	545,308.
TOTAL TO LINE 7	1,293,463.	1,293,463.

FORM 8916-A

OTHER INTEREST INCOME

STATEMENT 19

DESCRIPTION	PER INCOME STATEMENT	TEMPORARY DIFFERENCE	PERMANENT DIFFERENCE	PER TAX RETURN
INTEREST INCOME	26,418.	0.	0.	26,418.
TOTAL TO PART II, LINE 5	26,418.	0.	0.	26,418.

FORM 8916-A

OTHER INTEREST EXPENSE

STATEMENT 20

DESCRIPTION	PER INCOME STATEMENT	TEMPORARY DIFFERENCE	PERMANENT DIFFERENCE	PER TAX RETURN
INTEREST EXPENSE	1,218.	0.	0.	1,218.
TOTAL TO PART III, LINE 4	1,218.	0.	0.	1,218.

**Schedule K-1
(Form 1065)**Department of the Treasury
Internal Revenue Service**2023**

For calendar year 2023, or tax year

☐ Final K-1☐ Amended K-1

OMB No. 1545-0123

**Partner's Share of Income, Deductions,
Credits, etc.**

See separate instructions.

Part I Information About the Partnership**A** Partnership's employer identification number
85-4007578**B** Partnership's name, address, city, state, and ZIP code
IMMERSIVE ART SPACE, LP
C/O WALDMAN HIRSCH
3 SECOND STREET, SUITE 204
JERSEY CITY, NJ 07311**C** IRS center where partnership filed return:
E-FILE**D** ☐ Check if this is a publicly traded partnership (PTP)**Part II Information About the Partner****E** Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instructions.)
2401**F** Name, address, city, state, and ZIP code for partner entered in E. See instructions.**LIGHTHOUSE IMMERSIVE USA INC****G** ☐ General partner or LLC member-manager ☒ Limited partner or other LLC member**H1** ☒ Domestic partner ☐ Foreign partner**H2** ☐ If the partner is a disregarded entity (DE), enter the partner's:

TIN _____ Name _____

I1 What type of entity is this partner? **CORPORATION****I2** If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here ☐**J** Partner's share of profit, loss, and capital:

	Beginning	Ending
Profit	69.9000000 %	69.9000000 %
Loss	69.9000000 %	69.9000000 %
Capital	69.9000000 %	69.9000000 %

Check if decrease is due to:

☐ Sale or ☐ Exchange of partnership interest. See instructions.**K1** Partner's share of liabilities:

	Beginning	Ending
Nonrecourse	\$	\$
Qualified nonrecourse financing	\$	\$
Recourse	\$ 0.	\$ 0.

K2 Check this box if Item K-1 includes liability amounts from lower-tier partnerships ☐**K3** Check if any of the above liability is subject to guarantees or other payment obligations by the partner. See instructions ☐**L Partner's Capital Account Analysis**

Beginning capital account	\$ 6,041,145.
Capital contributed during the year	\$
Current year net income (loss)	\$ -1,216,329.
Other increase (decrease) (attach explanation)	\$
Withdrawals and distributions	\$ (2,907,333.)
Ending capital account	\$ 1,917,483.

M Did the partner contribute property with a built-in gain (loss)?☐ Yes ☒ No If "Yes," attach statement. See instructions.**N Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss)**

Beginning	\$
Ending	\$

Part III Partner's Share of Current Year Income, Deductions, Credits, and Other Items

1 Ordinary business income (loss) -1,231,689.	14 Self-employment earnings (loss)
2 Net rental real estate income (loss)	15 Credits
3 Other net rental income (loss)	
4a Guaranteed payments for services	16 Schedule K-3 is attached if checked <input type="checkbox"/>
4b Guaranteed payments for capital	17 Alternative min tax (AMT) items
4c Total guaranteed payments	
5 Interest income 18,466.	18 Tax-exempt income and nondeductible expenses
6a Ordinary dividends	C* 3,106.
6b Qualified dividends	
6c Dividend equivalents	19 Distributions
7 Royalties	A 2,907,333.
8 Net short-term capital gain (loss)	20 Other information
9a Net long-term capital gain (loss)	A 18,466.
9b Collectibles (28%) gain (loss)	N * 851.
9c Unrecaptured section 1250 gain	Z * STMT
10 Net section 1231 gain (loss)	AF * 17,615.
11 Other income (loss)	AJ * STMT
12 Section 179 deduction	21 Foreign taxes paid or accrued
13 Other deductions	
22 <input type="checkbox"/> More than one activity for at-risk purposes*	
23 <input type="checkbox"/> More than one activity for passive activity purposes*	

*See attached statement for additional information.

For IRS Use Only

IMMERSIVE ART SPACE, LP C/O WALDMAN HIRS

85-4007578

SCHEDULE K-1 NONDEDUCTIBLE EXPENSES, BOX 18, CODE C

DESCRIPTION	PARTNER FILING INSTRUCTIONS	AMOUNT
EXCLUDED MEALS AND ENTERTAINMENT EXPENSES	NONDEDUCTIBLE PORTION	3,106.
TOTAL TO SCHEDULE K-1, BOX 18, CODE C		3,106.

SCHEDULE K-1 BUSINESS INTEREST EXPENSE, BOX 20, CODE N

DESCRIPTION	PARTNER FILING INSTRUCTIONS	AMOUNT
BUSINESS INTEREST EXPENSE (INCLUDED IN ORDINARY BUSINESS INCOME (LOSS))	SEE PARTNERS INSTRUCTIONS	851.
TOTAL TO SCHEDULE K-1, BOX 20, CODE N		851.

SCHEDULE K-1 EXCESS BUSINESS LOSS LIMITATION
BOX 20, CODE AJ

DESCRIPTION	PARTNER FILING INSTRUCTIONS	AMOUNT
AGGREGATE BUSINESS ACTIVITY GROSS INCOME OR GAIN	SEE IRS SCH. K-1 INSTRUCTIONS	1,570,807.
AGGREGATE BUSINESS ACTIVITY DEDUCTION	SEE IRS SCH. K-1 INSTRUCTIONS	2,802,497.

SCHEDULE K-1 SECTION 199A INFORMATION, BOX 20, CODE Z

DESCRIPTION	AMOUNT
TRADE OR BUSINESS -	
ORDINARY INCOME (LOSS)	-1,231,689.
W-2 WAGES	599,826.
UNADJUSTED BASIS OF ASSETS	545,607.

IMMERSIVE ART SPACE, LP C/O WALDMAN HIRS

85-4007578

SCHEDULE K-1 SECTION 199A ADDITIONAL INFORMATION

THE SECTION 199A AMOUNTS TO BE USED IN THE CALCULATION OF QUALIFIED BUSINESS INCOME DEDUCTION ON YOUR 1040/1041 RETURN ARE REPORTED ON LINE 20, UNDER CODE Z. PLEASE CONSULT YOUR TAX ADVISOR REGARDING THE CALCULATION OF THE QUALIFIED BUSINESS INCOME DEDUCTION, INCLUDING THE POSSIBLE AGGREGATIONS AND LIMITATIONS THAT MAY APPLY AND THE FILING OF THE 1.199A-4(C)(2)(I) ANNUAL DISCLOSURE STATEMENT.

SCHEDULE K-1 EXCESS BUSINESS INTEREST INCOME, BOX 20, CODE AF

DESCRIPTION	PARTNER FILING INSTRUCTIONS	AMOUNT
EXCESS BUSINESS INTEREST INCOME	SEE IRS SCH. K-1 INSTRUCTIONS	17,615.
TOTAL TO SCHEDULE K-1, LINE 20 AF		17,615.

SCHEDULE K-1 CURRENT YEAR NET INCOME (LOSS) AND
OTHER INCREASES(DECREASES)

DESCRIPTION	AMOUNT	TOTALS
ORDINARY INCOME (LOSS)	-1,231,689.	
INTEREST INCOME	18,466.	
SCHEDULE K-1 INCOME SUBTOTAL		-1,213,223.
NONDEDUCTIBLE EXPENSES	-3,106.	
SCHEDULE K-1 DEDUCTIONS SUBTOTAL		-3,106.
NET INCOME (LOSS) PER SCHEDULE K-1		-1,216,329.

SCHEDULE K-1 SCHEDULE K-3 NOTIFICATION

THE SCHEDULE K-3 HAS NOT BEEN PREPARED FOR YOU. YOU WILL NOT RECEIVE A COPY OF THE SCHEDULE UNLESS YOU REQUEST ONE.

651123

**Schedule K-1
(Form 1065)**Department of the Treasury
Internal Revenue Service**2023**

For calendar year 2023, or tax year

☐ Final K-1☐ Amended K-1

OMB No. 1545-0123

Partner's Share of Income, Deductions, Credits, etc.

See separate instructions.

Part I Information About the Partnership**A** Partnership's employer identification number
85-4007578**B** Partnership's name, address, city, state, and ZIP code
IMMERSIVE ART SPACE, LP
C/O WALDMAN HIRSCH
3 SECOND STREET, SUITE 204
JERSEY CITY, NJ 07311**C** IRS center where partnership filed return:
E-FILE**D** ☐ Check if this is a publicly traded partnership (PTP)**Part II Information About the Partner****E** Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instructions.)
6111**F** Name, address, city, state, and ZIP code for partner entered in E. See instructions.**MAESTRO IMMERSIVE ARTS INC.****G** ☐ General partner or LLC member-manager ☒ Limited partner or other LLC member**H1** ☒ Domestic partner ☐ Foreign partner**H2** ☐ If the partner is a disregarded entity (DE), enter the partner's:

TIN _____ Name _____

I1 What type of entity is this partner? **CORPORATION****I2** If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here ☐**J** Partner's share of profit, loss, and capital:

	Beginning	Ending
Profit	29.9000000 %	29.9000000 %
Loss	29.9000000 %	29.9000000 %
Capital	29.9000000 %	29.9000000 %

Check if decrease is due to:

☐ Sale or ☐ Exchange of partnership interest. See instructions.**K1** Partner's share of liabilities:

	Beginning	Ending
Nonrecourse	\$	\$
Qualified nonrecourse financing	\$	\$
Recourse	\$ 0.	\$ 0.

K2 Check this box if Item K-1 includes liability amounts from lower-tier partnerships ☐**K3** Check if any of the above liability is subject to guarantees or other payment obligations by the partner. See instructions ☐**L Partner's Capital Account Analysis**

Beginning capital account	\$ 2,584,122.
Capital contributed during the year	\$
Current year net income (loss)	\$ -520,290.
Other increase (decrease) (attach explanation)	\$
Withdrawals and distributions	\$ (1,546,000.)
Ending capital account	\$ 517,832.

M Did the partner contribute property with a built-in gain (loss)?
☐ Yes ☒ No If "Yes," attach statement. See instructions.**N Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss)**

Beginning	\$
Ending	\$

Part III Partner's Share of Current Year Income, Deductions, Credits, and Other Items

1 Ordinary business income (loss) - 526,860.	14 Self-employment earnings (loss)
2 Net rental real estate income (loss)	15 Credits
3 Other net rental income (loss)	
4a Guaranteed payments for services	16 Schedule K-3 is attached if checked <input type="checkbox"/>
4b Guaranteed payments for capital	17 Alternative min tax (AMT) items
4c Total guaranteed payments	
5 Interest income 7,899.	18 Tax-exempt income and nondeductible expenses
6a Ordinary dividends	C* 1,329.
6b Qualified dividends	
6c Dividend equivalents	19 Distributions
7 Royalties	A 1,546,000.
8 Net short-term capital gain (loss)	20 Other information
9a Net long-term capital gain (loss)	A 7,899.
9b Collectibles (28%) gain (loss)	N * 364.
9c Unrecaptured section 1250 gain	Z * STMT
10 Net section 1231 gain (loss)	AF * 7,535.
11 Other income (loss)	AJ * STMT
12 Section 179 deduction	21 Foreign taxes paid or accrued
13 Other deductions	
22 <input type="checkbox"/> More than one activity for at-risk purposes*	
23 <input type="checkbox"/> More than one activity for passive activity purposes*	

*See attached statement for additional information.

For IRS Use Only

IMMERSIVE ART SPACE, LP C/O WALDMAN HIRS

85-4007578

SCHEDULE K-1 NONDEDUCTIBLE EXPENSES, BOX 18, CODE C

DESCRIPTION	PARTNER FILING INSTRUCTIONS	AMOUNT
EXCLUDED MEALS AND ENTERTAINMENT EXPENSES	NONDEDUCTIBLE PORTION	1,329.
TOTAL TO SCHEDULE K-1, BOX 18, CODE C		1,329.

SCHEDULE K-1 BUSINESS INTEREST EXPENSE, BOX 20, CODE N

DESCRIPTION	PARTNER FILING INSTRUCTIONS	AMOUNT
BUSINESS INTEREST EXPENSE (INCLUDED IN ORDINARY BUSINESS INCOME (LOSS))	SEE PARTNERS INSTRUCTIONS	364.
TOTAL TO SCHEDULE K-1, BOX 20, CODE N		364.

SCHEDULE K-1 EXCESS BUSINESS LOSS LIMITATION
BOX 20, CODE AJ

DESCRIPTION	PARTNER FILING INSTRUCTIONS	AMOUNT
AGGREGATE BUSINESS ACTIVITY GROSS INCOME OR GAIN	SEE IRS SCH. K-1 INSTRUCTIONS	671,920.
AGGREGATE BUSINESS ACTIVITY DEDUCTION	SEE IRS SCH. K-1 INSTRUCTIONS	1,198,778.

SCHEDULE K-1 SECTION 199A INFORMATION, BOX 20, CODE Z

DESCRIPTION	AMOUNT
TRADE OR BUSINESS -	
ORDINARY INCOME (LOSS)	-526,860.
W-2 WAGES	256,578.
UNADJUSTED BASIS OF ASSETS	233,385.

IMMERSIVE ART SPACE, LP C/O WALDMAN HIRS

85-4007578

SCHEDULE K-1 SECTION 199A ADDITIONAL INFORMATION

THE SECTION 199A AMOUNTS TO BE USED IN THE CALCULATION OF QUALIFIED BUSINESS INCOME DEDUCTION ON YOUR 1040/1041 RETURN ARE REPORTED ON LINE 20, UNDER CODE Z. PLEASE CONSULT YOUR TAX ADVISOR REGARDING THE CALCULATION OF THE QUALIFIED BUSINESS INCOME DEDUCTION, INCLUDING THE POSSIBLE AGGREGATIONS AND LIMITATIONS THAT MAY APPLY AND THE FILING OF THE 1.199A-4(C)(2)(I) ANNUAL DISCLOSURE STATEMENT.

SCHEDULE K-1 EXCESS BUSINESS INTEREST INCOME, BOX 20, CODE AF

DESCRIPTION	PARTNER FILING INSTRUCTIONS	AMOUNT
EXCESS BUSINESS INTEREST INCOME	SEE IRS SCH. K-1 INSTRUCTIONS	7,535.
TOTAL TO SCHEDULE K-1, LINE 20 AF		7,535.

SCHEDULE K-1 CURRENT YEAR NET INCOME (LOSS) AND OTHER INCREASES(DECREASES)

DESCRIPTION	AMOUNT	TOTALS
ORDINARY INCOME (LOSS)	-526,860.	
INTEREST INCOME	7,899.	
SCHEDULE K-1 INCOME SUBTOTAL		-518,961.
NONDEDUCTIBLE EXPENSES	-1,329.	
SCHEDULE K-1 DEDUCTIONS SUBTOTAL		-1,329.
NET INCOME (LOSS) PER SCHEDULE K-1		-520,290.

SCHEDULE K-1 SCHEDULE K-3 NOTIFICATION

THE SCHEDULE K-3 HAS NOT BEEN PREPARED FOR YOU. YOU WILL NOT RECEIVE A COPY OF THE SCHEDULE UNLESS YOU REQUEST ONE.

651123

Schedule K-1
(Form 1065)Department of the Treasury
Internal Revenue Service**2023**

For calendar year 2023, or tax year

beginning

ending

Partner's Share of Income, Deductions, Credits, etc.

See separate instructions.

☐ Final K-1☐ Amended K-1

OMB No. 1545-0123

Part III Partner's Share of Current Year Income, Deductions, Credits, and Other Items

1 Ordinary business income (loss) - 3,524.	14 Self-employment earnings (loss) A - 3,524.
2 Net rental real estate income (loss)	C 4,494.
3 Other net rental income (loss)	15 Credits
4a Guaranteed payments for services	16 Schedule K-3 is attached if checked <input type="checkbox"/>
4b Guaranteed payments for capital	17 Alternative min tax (AMT) items
4c Total guaranteed payments	
5 Interest income 53.	18 Tax-exempt income and nondeductible expenses
6a Ordinary dividends	C* 9.
6b Qualified dividends	
6c Dividend equivalents	19 Distributions
7 Royalties	20 Other information A 53.
8 Net short-term capital gain (loss)	N * 2. Z * STMT
9a Net long-term capital gain (loss)	AF * 50. AJ * STMT
9b Collectibles (28%) gain (loss)	
9c Unrecaptured section 1250 gain	
10 Net section 1231 gain (loss)	
11 Other income (loss)	
12 Section 179 deduction	21 Foreign taxes paid or accrued
13 Other deductions	
22 <input type="checkbox"/> More than one activity for at-risk purposes*	
23 <input type="checkbox"/> More than one activity for passive activity purposes*	

*See attached statement for additional information.

For IRS Use Only

Part I Information About the Partnership**A** Partnership's employer identification number
85-4007578**B** Partnership's name, address, city, state, and ZIP code
IMMERSIVE ART SPACE, LP
C/O WALDMAN HIRSCH
3 SECOND STREET, SUITE 204
JERSEY CITY, NJ 07311**C** IRS center where partnership filed return:
E-FILE**D** ☐ Check if this is a publicly traded partnership (PTP)**Part II Information About the Partner****E** Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instructions.)
8079**F** Name, address, city, state, and ZIP code for partner entered in E. See instructions.

IMMERSIVE ARTS SPACE LLC

G ☒ General partner or LLC member-manager ☐ Limited partner or other LLC member**H1** ☒ Domestic partner ☐ Foreign partner**H2** ☐ If the partner is a disregarded entity (DE), enter the partner's:

TIN _____ Name _____

I1 What type of entity is this partner? **PARTNERSHIP****I2** If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here ☐**J** Partner's share of profit, loss, and capital:

	Beginning	Ending
Profit	0.2000000 %	0.2000000 %
Loss	0.2000000 %	0.2000000 %
Capital	0.2000000 %	0.2000000 %

Check if decrease is due to:

☐ Sale or ☐ Exchange of partnership interest. See instructions.**K1** Partner's share of liabilities:

	Beginning	Ending
Nonrecourse	\$	\$
Qualified nonrecourse financing	\$	\$
Recourse	\$ 6,381,012.	\$ 3,696,987.

K2 Check this box if Item K-1 includes liability amounts from lower-tier partnerships ☐**K3** Check if any of the above liability is subject to guarantees or other payment obligations by the partner. See instructions ☐**L Partner's Capital Account Analysis**

Beginning capital account	\$ 17,285.
Capital contributed during the year	\$
Current year net income (loss)	\$ -3,480.
Other increase (decrease) (attach explanation)	\$
Withdrawals and distributions	\$ ()
Ending capital account	\$ 13,805.

M Did the partner contribute property with a built-in gain (loss)?☐ Yes ☒ No If "Yes," attach statement. See instructions.**N Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss)**

Beginning	\$
Ending	\$

IMMERSIVE ART SPACE, LP C/O WALDMAN HIRS

85-4007578

SCHEDULE K-1 NONDEDUCTIBLE EXPENSES, BOX 18, CODE C

DESCRIPTION	PARTNER FILING INSTRUCTIONS	AMOUNT
EXCLUDED MEALS AND ENTERTAINMENT EXPENSES	NONDEDUCTIBLE PORTION	9.
TOTAL TO SCHEDULE K-1, BOX 18, CODE C		9.

SCHEDULE K-1 BUSINESS INTEREST EXPENSE, BOX 20, CODE N

DESCRIPTION	PARTNER FILING INSTRUCTIONS	AMOUNT
BUSINESS INTEREST EXPENSE (INCLUDED IN ORDINARY BUSINESS INCOME (LOSS))	SEE PARTNERS INSTRUCTIONS	2.
TOTAL TO SCHEDULE K-1, BOX 20, CODE N		2.

SCHEDULE K-1 EXCESS BUSINESS LOSS LIMITATION
BOX 20, CODE AJ

DESCRIPTION	PARTNER FILING INSTRUCTIONS	AMOUNT
AGGREGATE BUSINESS ACTIVITY GROSS INCOME OR GAIN	SEE IRS SCH. K-1 INSTRUCTIONS	4,494.
AGGREGATE BUSINESS ACTIVITY DEDUCTION	SEE IRS SCH. K-1 INSTRUCTIONS	8,019.

SCHEDULE K-1 SECTION 199A INFORMATION, BOX 20, CODE Z

DESCRIPTION	AMOUNT
TRADE OR BUSINESS -	
ORDINARY INCOME (LOSS)	-3,524.
SELF-EMPLOYMENT EARNINGS (LOSS)	-3,524.
W-2 WAGES	1,716.
UNADJUSTED BASIS OF ASSETS	1,561.

IMMERSIVE ART SPACE, LP C/O WALDMAN HIRS

85-4007578

SCHEDULE K-1 SECTION 199A ADDITIONAL INFORMATION

THE SECTION 199A AMOUNTS TO BE USED IN THE CALCULATION OF QUALIFIED BUSINESS INCOME DEDUCTION ON YOUR 1040/1041 RETURN ARE REPORTED ON LINE 20, UNDER CODE Z. PLEASE CONSULT YOUR TAX ADVISOR REGARDING THE CALCULATION OF THE QUALIFIED BUSINESS INCOME DEDUCTION, INCLUDING THE POSSIBLE AGGREGATIONS AND LIMITATIONS THAT MAY APPLY AND THE FILING OF THE 1.199A-4(C)(2)(I) ANNUAL DISCLOSURE STATEMENT.

SCHEDULE K-1 EXCESS BUSINESS INTEREST INCOME, BOX 20, CODE AF

DESCRIPTION	PARTNER FILING INSTRUCTIONS	AMOUNT
EXCESS BUSINESS INTEREST INCOME	SEE IRS SCH. K-1 INSTRUCTIONS	50.
TOTAL TO SCHEDULE K-1, LINE 20 AF		50.

SCHEDULE K-1 CURRENT YEAR NET INCOME (LOSS) AND
OTHER INCREASES(DECREASES)

DESCRIPTION	AMOUNT	TOTALS
ORDINARY INCOME (LOSS)	-3,524.	
INTEREST INCOME	53.	
SCHEDULE K-1 INCOME SUBTOTAL		-3,471.
NONDEDUCTIBLE EXPENSES	-9.	
SCHEDULE K-1 DEDUCTIONS SUBTOTAL		-9.
NET INCOME (LOSS) PER SCHEDULE K-1		-3,480.

SCHEDULE K-1 SCHEDULE K-3 NOTIFICATION

THE SCHEDULE K-3 HAS NOT BEEN PREPARED FOR YOU. YOU WILL NOT RECEIVE A COPY OF THE SCHEDULE UNLESS YOU REQUEST ONE.

Immersive Art Space LP
Profit and Loss
January - December 2024

	<u>Total</u>
Income	
40000-16 TICKET SALES	
40005-16 Stripe Ticket Sales	11,706.16
40010-16 Universe Fees Passed on to Buyer	4,289.26
40045-16 Square Box Office Sales	564.21
40060-16 Refunds	-111.76
40075-16 Broker Ticket Sales	336.05
Total 40000-16 TICKET SALES	\$ 16,783.92
41000-16 MERCHANDISE SALES	
41005-16 Lightspeed Merchandise Sales	1,203.07
41020-16 Product - On-Site Sales	-4,906.00
Total 41000-16 MERCHANDISE SALES	-\$ 3,702.93
42000-16 CAFE AND BAR SALES	
42005-16 Cafe Beverage	144.46
42010-16 Cafe Food	125.94
42015-16 Gallery Bar Sales	385.43
Total 42000-16 CAFE AND BAR SALES	\$ 655.83
44000-16 Other Sales	32,245.67
44010-16 Parking Revenue	50.47
45200-16 Discounts	-132.89
Total Income	\$ 45,900.07
Cost of Goods Sold	
50000-16 TICKETS COST	
50050-16 Stripe and Universe Fees	3,222.78
Total 50000-16 TICKETS COST	\$ 3,222.78
50502-16 Royalties	-23,282.25
51000-16 MERCHANDISE COST	
51020-16 Lightspeed Fees	33.48
51025-16 Other Merch COGS	153.50
Total 51000-16 MERCHANDISE COST	\$ 186.98
52000-16 CAFE COST	
52015-16 Cafe Supplies	18,157.90
52025-16 Dalewell Cost	
52027-16 Wine Cost	4,235.19
Total 52025-16 Dalewell Cost	\$ 4,235.19
Total 52000-16 CAFE COST	\$ 22,393.09
57000-16 Intercompany COGS	
57300-16 Interco Management Fees COGS	-91,000.00
Total 57000-16 Intercompany COGS	-\$ 91,000.00

Total Cost of Goods Sold	-\$	88,479.40
Gross Profit	\$	134,379.47
Expenses		
60000-16 PAYROLL EXPENSES		
60100-16 WAGES		
60105-16 Wages - Management		30,036.56
60120-16 Wages - Box Office		5,760.00
60140-16 Wages - Other		12,996.00
60155-16 Wages - Cafe		1,756.66
60180-16 Wages - Retail		3,656.71
Total 60100-16 WAGES	\$	54,205.93
60200-16 PAYROLL TAXES		6,062.02
60300-16 EMPLOYEE BENEFITS		-2,328.24
60315-16 Other Employee Benefits		845.52
60335-16 Medical and Dental		-49,634.27
Total 60300-16 EMPLOYEE BENEFITS	-\$	51,116.99
60400-16 OTHER PAYROLL		1,610.10
60405-16 Payroll Processing		1,053.43
Total 60400-16 OTHER PAYROLL	\$	2,663.53
Total 60000-16 PAYROLL EXPENSES	\$	11,814.49
60500-16 Operating Expenses		
60510-16 Bar and Concessions		-116,475.47
60525-16 Communications		26.53
60550-16 Photography/ Videography		495.00
Total 60500-16 Operating Expenses	-\$	115,953.94
61000-16 MARKETING EXPENSES		
61005-16 Outdoor Advertising		-19,411.75
61015-16 Print Advertising		-2,012.40
61025-16 Online Advertising		0.00
61030-16 Digital Advertising		373.72
61050-16 Publicity		-5,785.00
61075-16 Other Marketing Expense		-953.25
Total 61000-16 MARKETING EXPENSES	-\$	27,788.68
62000-16 OCCUPANCY COSTS		
62005-16 Venue- Rent		248,000.00
62011-16 Insurance - Liability		11,036.00
62015-16 Repairs & Maintenance		22,454.14
62020-16 Utilities		12,069.12
62025-16 Waste Removal		10,238.72
62030-16 Professional Fee - Security		-1,220.63
62045-16 Load-Out		15,876.71
62060-16 Other Operating Expense		764.03
Total 62000-16 OCCUPANCY COSTS	\$	319,218.09
63000-16 ADMINISTRATIVE EXPENSES		

63015-16 Square Fees	-747.17
63035-16 Offices Software	7,074.37
63040-16 Office Supplies	-20.00
63045-16 Travel Expenses	-170.24
63050-16 Meals and Entertainment	642.28
63055-16 Professional Services	100.00
63065-16 Bank Fees	6,409.35
63070-16 Professional Fee - Legal	80,163.51
63075-16 Professional Fee - Accounting	22,500.00
63091-16 Parking	28.00
63100-16 Per Diems	830.71
63115-16 Dues and Subscriptions	1,436.18
63125-16 Courier, Shipping, Postage	41.05
63130-16 Storage and Warehouse Fees	16,000.00
Total 63000-16 ADMINISTRATIVE EXPENSES	\$ 134,288.04
63150-16 Other Miscellaneous Expense	4.18
64000-16 Uncategorized Expense	10,002.98
65000-16 Production Expenses	
65020-16 Equipment Rental	698.36
65030-16 Pre-Production Amortization	256,315.06
Total 65000-16 Production Expenses	\$ 257,013.42
67100-16 Reserve for Bad Debts	19,615.20
Total Expenses	\$ 608,213.78
Net Operating Income	-\$ 473,834.31
Other Income	
80000-16 Interest Income	1,602.56
Total Other Income	\$ 1,602.56
Other Expenses	
Unrealized Gain or Loss	-1.92
94000-16 Exchange Gain or Loss	70.55
Total Other Expenses	\$ 68.63
Net Other Income	\$ 1,533.93
Net Income	-\$ 472,300.38

Immersive Art Space LP
Profit and Loss
January 1 - May 30, 2025

	Total
Income	
41000-16 MERCHANDISE SALES	
41020-16 Product - On-Site Sales	-712.50
Total 41000-16 MERCHANDISE SALES	-\$ 712.50
44000-16 Other Sales	56,000.00
49999-16 Uncategorized Income	271,049.89
Total Income	\$ 326,337.39
Cost of Goods Sold	
50000-16 TICKETS COST	
50050-16 Stripe and Universe Fees	1,467.98
Total 50000-16 TICKETS COST	\$ 1,467.98
Total Cost of Goods Sold	\$ 1,467.98
Gross Profit	\$ 324,869.41
Expenses	
62000-16 OCCUPANCY COSTS	
62011-16 Insurance - Liability	-1,095.00
Total 62000-16 OCCUPANCY COSTS	-\$ 1,095.00
63000-16 ADMINISTRATIVE EXPENSES	
63035-16 Offices Software	1,205.55
63045-16 Travel Expenses	947.70
63050-16 Meals and Entertainment	9.99
63055-16 Professional Services	58,601.00
63065-16 Bank Fees	2,841.97
63070-16 Professional Fee - Legal	230,000.00
63075-16 Professional Fee - Accounting	1,000.00
63091-16 Parking	7.50
63115-16 Dues and Subscriptions	543.44
63130-16 Storage and Warehouse Fees	16,000.00
Total 63000-16 ADMINISTRATIVE EXPENSES	\$ 311,157.15
Total Expenses	\$ 310,062.15
Net Operating Income	\$ 14,807.26
Other Income	
82001-16 Wages Subsidy Received	390,679.75
Total Other Income	\$ 390,679.75
Other Expenses	
Unrealized Gain or Loss	0.00
Total Other Expenses	\$ 0.00
Net Other Income	\$ 390,679.75
Net Income	\$ 405,487.01

Immersive Art Space LP

Balance Sheet

As of May 30, 2025

	<u>Total</u>
ASSETS	
Current Assets	
Bank Accounts	
10000-16 CNB0787 Checking	506,393.39
10005-16 CHASE2019 Checking	396.78
10010-16 CNB Money Market USD (6110)	3,007.31
10230-16 Stripe Clearing (LH Chicago #2)	-2.74
Total Bank Accounts	\$ 509,794.74
Accounts Receivable	
11000-16 Accounts Receivable (A/R)	0.00
Total Accounts Receivable	\$ 0.00
Total Current Assets	\$ 509,794.74
Fixed Assets	
14000-16 Furniture & Fixtures	
14005-16 Original cost	164,328.59
Total 14000-16 Furniture & Fixtures	\$ 164,328.59
14100-16 Leasehold Improvements	38,500.00
14200-16 A/V EQUIPMENT	3,859.74
14205-16 Original cost	418,437.19
Total 14200-16 A/V EQUIPMENT	\$ 422,296.93
14400-16 OTHER EQUIPMENT	
14405-16 Other Equipment-Original Cost	37,044.83
Total 14400-16 OTHER EQUIPMENT	\$ 37,044.83
14600-16 SOFTWARE DEVELOPMENT	
14605-16 Software Development	28,356.59
Total 14600-16 SOFTWARE DEVELOPMENT	\$ 28,356.59
15100-16 PRE-PRODUCTION	13,228.09
15105-16 Bar and Concessions	6,376.81
15106-16 Equipment - Grab and Gogh	550.00
Total 15105-16 Bar and Concessions	\$ 6,926.81
15110-16 Box Office Setup	568.19
15115-16 Cleaning	7,330.02
15120-16 Employee Labor	17,225.00
15125-16 Consulting Fees	12,421.63
15130-16 Dues & Subscriptions	570.00
15135-16 Freight Charges	21,466.57
15140-16 G&A Bank Fees	11,706.68
15145-16 Other Pre-Production	124,976.28
15150-16 Insurance	10,996.49

15155-16 Labor	184,472.08
15157-16 Show Creation	222,336.24
15160-16 Legal Fees	105,783.95
15165-16 Set Design and Construction	8,184.43
15166-16 Installation & Load Out	56,352.05
15167-16 PPE	27,380.43
15168-16 Construction & Equipment	125,552.80
15169-16 License Fees	168,059.75
15170-16 Lighting	894.56
15171-16 Management/Overhead	85,987.25
15172-16 Tech Fees	2,703.94
15176-16 Meals	3,491.84
15177-16 Transportation and Accommodation	47,479.35
15185-16 Office Equipment	274.35
15190-16 Production	30,497.05
15192-16 Rent	
15194-16 Catering	16,512.47
Total 15192-16 Rent	\$ 16,512.47
15193-16 Security	2,823.26
15195-16 Show License Fee	318,561.06
15196-16 Digital Marketing	24,934.10
15197-16 PP Marketing	736.86
15198-16 PP Scenic Elements	4,843.45
15199-16 Pre-Production - Accumulated Amortization	-1,663,732.53
Total 15100-16 PRE-PRODUCTION	\$ 1,544.50
Total Fixed Assets	\$ 692,071.44
Other Assets	
15000-16 DESIGN	
15005-16 Interior Design & Furnishing Fees	155.28
Total 15000-16 DESIGN	\$ 155.28
Total Other Assets	\$ 155.28
TOTAL ASSETS	\$ 1,202,021.46
LIABILITIES AND EQUITY	
Liabilities	
Current Liabilities	
Accounts Payable	
20000-16 Accounts Payable	1,179,880.80
20005-16 Accounts Payable (A/P) - CAD	2,027.18
20010-16 Accounts Payable (A/P) - EUR	0.00
Total Accounts Payable	\$ 1,181,907.98
Credit Cards	
21000-16 AMEX CC - M.Schlover (1009)	108.74
Total Credit Cards	\$ 108.74
Other Current Liabilities	

22105-16 SALES TAX PAYABLE	
22107-16 MPEA Tax 1% ST-4	-2,176.00
22115-16 Sales Tax	90,889.99
Total 22105-16 SALES TAX PAYABLE	\$ 88,713.99
22150-16 Medical and Dental Liability	0.00
22200-16 Unearned Revenue - Ticket Sales	52,184.44
26001-16 Due to/from Lighthouse Immersive Inc USD	138,114.07
26002-16 Due to/From Lighthouse Immersive USA, Inc	792,240.40
26004-16 Due to/from Lighthouse Immersive Las Vegas LLC	1,050.00
26013-16 Due to/from Lighthouse Magic Maze USA Inc	-1,197.54
26014-16 Due to/from Lighthouse Artspace Minneapolis LLC	-458,354.38
26015-16 Due to/from Immersive Artspace NY LP	905,817.31
26017-16 Due to/from Immersive Artspace Boston	-3,796,194.08
26018-16 Due to/from Immersive Artspace Miami LLC	-1,361,479.40
26030-16 Due to/from Immersive Artspace LLC	329,700.75
26032-16 Due to/from Lighthouse Immersive Studios USA Corp	2,100.00
26046-16 Due to/from Lighthouse Immersive Nevada Inc	200.00
Total Other Current Liabilities	-\$ 3,307,104.44
Total Current Liabilities	-\$ 2,125,087.72
Total Liabilities	-\$ 2,125,087.72
Equity	
33000-16 PARTNER DISTRIBUTIONS	
33005-16 Lighthouse Immersive USA Inc.	-2,907,333.33
33010-16 Maestro Distribution	-1,546,000.00
Total 33000-16 PARTNER DISTRIBUTIONS	-\$ 4,453,333.33
34000-16 Retained Earnings	7,374,955.49
Net Income	405,487.01
Total Equity	\$ 3,327,109.17
TOTAL LIABILITIES AND EQUITY	\$ 1,202,021.45